



# United States University

## College of Nursing Baccalaureate & Graduate Nursing Programs

### Volume I:

- Program Information Form
  - Self Study Report

**Prepared for Commission on Collegiate Nursing Education  
July 2017**

Original Graduate Site Visit: September 8 – 10, 2014  
Original Baccalaureate Site Visit: September 2 – 4, 2015  
Upcoming Site Visit: September 11 -13, 2017





# Table of Contents

InterAmerican College and United States University .....	3
History .....	3
USU Vision .....	4
USU Mission .....	4
The College of Nursing.....	4
Philosophy of the College .....	4
Program History .....	4
College Staff .....	5
Accreditation Issues and Concerns.....	5
Standard I .....	6
I-A. The mission, goals, and expected program outcomes are:.....	6
I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect: .....	14
I-C. Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.....	14
I-D. Faculty and students participate in program governance. ....	15
I-E. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications. ....	18
I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are: .....	21
Standard I Summary.....	22
Areas of Accomplishment .....	22
Areas for Continued Focus .....	22
Standard II .....	23
II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.....	23
II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs. ....	25
II-C. The chief nurse administrator: .....	35
II-D. Faculty are:.....	35
II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes. ....	36
II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.....	37
Standard II Summary .....	38
Areas of Accomplishment .....	38
Areas for Continued Focus .....	38
Standard III .....	39

III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program’s mission and goals, and with the roles for which the program is preparing its graduates. ....	39
III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate). ....	40
III-C. The curriculum is logically structured to achieve expected student outcomes. ....	47
III-D. Teaching-learning practices and environments support the achievement of expected student outcomes. ....	49
III-E. The curriculum includes planned clinical practice experiences that: .....	50
III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest. ....	53
III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied. ....	56
III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement. ....	62
Standard III Summary .....	63
Areas of Accomplishment .....	63
Areas for Continued Focus .....	63
Standard IV .....	64
IV-A. A systematic process is used to determine program effectiveness. ....	64
IV-B. Program completion rates demonstrate program effectiveness. ....	67
IV-C. Licensure and certification pass rates demonstrate program effectiveness. ....	69
IV-D. Employment rates demonstrate program effectiveness.....	70
IV-E. Program outcomes demonstrate program effectiveness. ....	71
IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness. ....	79
IV-G. The program defines and reviews formal complaints according to established policies. ....	81
IV-H. Data analysis is used to foster ongoing program improvement. ....	82
Standard IV Summary .....	85
Areas of Accomplishment .....	85
Areas for Continued Focus .....	86

The Table of Contents and all the Appendices in the Self Study contain live links. Double Click on it item and it will go to the referenced page/document.

# Introduction

## InterAmerican College and United States University

### History

United States University (USU) is a private, proprietary institution that evolved from a small non-profit establishment known as InterAmerican College (IAC), which began in 1997. This non-profit college's mission was to provide educational opportunities to working professionals, Latinos, and educated immigrants to increase bilingual capacity in education and healthcare in Southern California. When USU was started, there were no programs or universities with a mission to primarily serve minority, immigrant, and underserved students seeking a career in the health sciences and nursing. This mission was highly valued by the South Bay and greater San Diego community due to the large immigrant population. USU remains committed to providing quality, affordable educational opportunities to this population.

IAC continued to grow but with fiscal exigencies arising, and at the suggestion of the WASC Senior College and University Commission (WSCUC) leadership, the institution moved to become a for-profit institution in 2009. It was approved for the structural change and accredited by WSCUC in 2009. In April 2010, the school was renamed United States University. USU moved from its original location in National City, CA to its new facility in Chula Vista, CA in May 2011.

In June 2014, WSCUC's Structural Change Committee approved Linden, LLC (Linden) as the owner of USU. Linden brought a commitment to the continued institutional well-being of USU and its students. One significant indication of that was the move in 2016 from Chula Vista to the current facility in Mission Valley, CA, a move designed to improve the facilities for USU students. Furthermore, Linden has been steadfast in providing expertise in the ongoing efforts to establish fiscal sustainability while providing full support to all efforts geared toward greater academic quality and student success. Whereas the latter efforts have met with success, the former have not, which stretched Linden's financial capacity to the limit. As such, Linden has spent the last year searching for an investor committed to educational excellence with the experience, expertise, and resources to dedicate to USU.

The status of this project has been fully disclosed to the USU Board of Trustees as well as the entire university community. At its regularly scheduled meeting on April 26, 2017, the Board met with Mr. Michael Mathews, Chief Executive Officer and Director of Aspen University (AU) and Aspen Group, Inc. (AGI) (Appendix I.1: USU BOT Minutes 04-26-2017). In an electronic resolution dated May 1, 2017, the Board of Trustees voted unanimously to support the efforts of Linden to move forward towards a final agreement with AGI in a change of ownership (Appendix I.2: USU BOT Motion to Support Aspen Transaction 05-01-2017). AGI is the parent company of Aspen University, a publicly traded post-secondary institution which is dedicated to helping students achieve upward mobility and long-term economic success through superior education, financial prudence, and career advancement. As of April 30, 2017, after three years of intensive work, AU has 4,675 students in four schools, the largest of which is the School of Nursing whose largest program is an RN to BSN.

Both parties understand that such a change in ownership is dependent upon approval by WSCUC. Throughout the discussions, both parties kept USU administrative leadership aware of the negotiations and the proposed outcome. In the spirit of complete transparency, Mr. Mathews and colleagues from AU, including the Chief Academic Officer, Chief Financial Officer, and Chief Operating Officer, met with core faculty and staff on March 15, 2017 to make personal introductions, to confirm that negotiations for the purchase of USU were underway and that the mission, vision, and values of the university were to be perpetuated and reinforced (Appendix I.3: March 15, 2017 All Hands Meeting Agenda). Of equal importance, Mr. Mathews cited the USU core value of "affordability," stating that USU would become a national role model when, as with the case of AU, it offered students the opportunity to earn a university degree with little to no debt to be satisfied upon graduation. Academic excellence and institutional growth were the two primary foci of the session.

When the principals agreed in substance to initiate the process to change ownership from Linden to AGI, the USU President and WSCUC Accreditation Liaison Officer (ALO) was notified immediately. He, the CEO of Linden, Dr. Oksana Malysheva, and the Chair of the Board of Trustees, Patricia Potter, immediately notified the WSCUC staff liaison, Dr. Barbara Gross Davis, and then filed the appropriate request for substantive change. On May 17, 2017, USU submitted a Change in Ownership Proposal to WSCUC and has been in regular contact with

WSCUC regarding it. WSCUC is scheduled to take up the change of ownership proposal at its commission meeting in November 2017.

If approved, AGI will implement USU's strategic plan by applying the same organic enrollment strategies to USU as it has to AU (Appendix I.4: USU Strategic Plan 2015-2019). The pioneering Monthly Payment Plan (MPP) model inaugurated at AU three years ago will also be implemented at USU. In order to make an MPP affordable for adults of all income levels, AU dropped its cost per credit hour to \$150 for undergraduate programs and \$325 for master-level and Nursing programs. MSN students were able to consequently pay their tuition over 36 months (\$325 per month). Fees are added to the student's account balance and they may continue paying \$325 per month until the balance is fully paid. The MPP is offered entirely interest free, making it essentially a no-interest private student loan designed to allow the student to achieve their degree and hold no debt upon graduation. The College of Nursing (CON) fully supports AGI's pending acquisition of USU.

The university remains fully accredited by WSCUC (with notice of concern). Currently, USU continues to offer programs in Nursing, Business, Health Sciences, and Education.

### **USU Vision**

*Our students will achieve their fullest potential to live, work and lead within the global community.*

### **USU Mission**

*United States University provides professional and personal educational opportunities, with a special outreach to underserved groups. Through campus and online courses, the University offers affordable, relevant and accessible undergraduate and graduate degree programs and certificates in a supportive student-centered learning environment.*

## **The College of Nursing**

### **Philosophy of the College**

The philosophy of the College of Nursing, grounded in Caring Science and preparing nurses to be innovative leaders in a dynamic healthcare system, acknowledges nursing as a discipline with a unique body of knowledge and a professional practice informed by the view of persons, health and healing, health care nursing, and curriculum. Scholarship and practice in nursing require creative integration of multiple ways of knowing and integration of current knowledge in health. Nurses make a unique contribution because of their special focus: nurturing the wholeness of persons and environment through caring. We believe in the wholeness of human beings. We believe that people have the ability to identify their own needs, have inner wisdom to solve their own problems, and often only need support and/or understanding to better recognize and respond to their healthcare issues. Health is individually and subjectively defined and best understood by the person experiencing it.

### **Program History**

The College of Nursing has been in existence since 2005, when the institution was still called IAC. In 2005, the California Wellness Foundation awarded IAC a planning grant to develop a nursing program. The institution submitted a feasibility study to the California Board of Registered Nursing (BRN) in 2006 to establish and operate nursing programs and this was approved in June 13, 2008. In 2009, IAC began its first offering in this area. The Entry Level Masters<sup>1</sup> (ELM) was a two-phase, non-degree/degree program that admitted students with a bachelor's degree in another field or discipline. The first phase educated students to take the National Council Licensure Examination (NCLEX) for their Registered Nurse License. In the second phase, the students matriculated into the Master of Science in Nursing Family Nurse Practitioner specialty track (MSN-FNP). The BRN approved this program in 2009. In 2010, the CON began to offer the MSN-FNP and the online RN to BSN program that were both approved by WSCUC. USU was approved by WASC in 2011 to offer a Master of Science

---

<sup>1</sup> Upon recommendation of the CA Board of Registered Nursing, this program was renamed in 2013 the Entry Level Masters (ELM) with an Accelerated Bachelor of Science in Nursing (ABS/N) option.

in Nursing (MSN) with two specialty tracks, one in Administration and one in Education. In September 2013, the BRN approved the Accelerated Baccalaureate Degree (ABSN) as an admission option of the ELM. The CON implemented this as a way to improve student enrollment and retention, although when that was not successful, the program was closed in August 2016 after the last cohort graduated. The CON currently offers WSCUC-approved and CCNE-accredited RN to BSN, MSN-Family Nurse Practitioner, MSN-Nurse Leadership for Health Systems Management Innovation, and MSN-Online Education and Education Technology degree programs. The BRN has additionally approved the MSN-Family Nurse Practitioner degree program.

### **College Staff**

The CON was fully reorganized in July 2014 with the hiring of a new Dean of the College, Dr. Renee P. McLeod, PhD, APRN, FAANP, whose commitment to the college led her to institute an immediate review of all current programs and to staff the college with highly competent personnel. The curricular review led to major revisions in all programs and to CCNE's initial accreditation of the MSN programs in 2014 and the BSN program in 2015. Today, CON staff and core faculty consists of the following:

- Associate Dean for Academic Affairs, who also acts as Program Director for the MSN-Nurse Leadership and Online Education programs and as a core faculty member
- Associate Dean for Faculty and Research who acts additionally as a core faculty member
- Director of the RN to BSN program who acts additionally as a core faculty member
- Director of the MSN-FNP program who acts additionally as faculty member (part-time)
- Clinical Placement Coordinator (full-time)
- Instructional Designer (part-time)
- Director of Evaluation and Contracts who administers Project Concert<sup>®</sup> (part-time)

### **Accreditation Issues and Concerns**

The CON has had a series of accreditation issues since 2011. These have included issues of noncompliance with BRN standards and issues of noncompliance with CCNE standards for the MSN program.

The BRN compliance issues revolved around the ELM/ABSN program. Between 2012 and 2014, the CON brought the program into compliance and the BRN continued its approval in 2016. In November 2016, the BRN acknowledged the program's closing in good standing (Appendix I.5: BRN ABSN Closure Acknowledgement Letter).

In June 2016, the CON submitted its combined special report and CIPR for the MSN program. At its Fall 2016 meeting, the CCNE Board of Commissioners issued a show cause directive for the MSN program dated November 15, 2016. The program submitted a follow-up report to CCNE on April 1, 2017, and at its May 8, 2017 meeting, the CCNE Board acted to continue the existing show cause directive (Appendix I.6: CCNE Action Letter, May 19, 2017). Continuing compliance concerns for Key Elements III-E, IV-E, IV-F, and IV-H led to Standards III and IV designated as "not met." The CCNE Board directed the program to submit a follow-up report by September 1, 2017 in which it would address the compliance concern identified in the Action Letter. While the program is prepared to submit that progress report on time, this self-study addresses those concerns as well.

A CCNE site visit is scheduled for September 11-13, 2017 and will encompass both the RN to BSN and MSN programs. All previous CCNE accreditation self-studies, Responses, Action Letters, etc., will be available during the site visit.

A BRN site visit is currently scheduled for Spring 2018 for the approved MSN-Family Nurse Practitioner degree program. All previous BRN accreditation self-studies, CIPRs, Responses, Action Letters, etc. will be available during the site visit.

## Standard I

### Program Quality: Mission and Governance

The mission, goals, and expected program outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program's mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.

#### I-A. The mission, goals, and expected program outcomes are:

- congruent with those of the parent institution; and
- consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.

*Elaboration: The program's mission statement, goals, and expected program outcomes are written and accessible to current and prospective students, faculty, and other constituents. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree/certificate programs exist. Student outcomes may be expressed as competencies, objectives, benchmarks, or other terminology congruent with institutional and program norms.*

*The program identifies the professional nursing standards and guidelines it uses. CCNE requires, as appropriate, the following professional nursing standards and guidelines:*

- *The Essentials of Baccalaureate Education for Professional Nursing Practice [American Association of Colleges of Nursing (AACN), 2008];*
- *The Essentials of Master's Education in Nursing (AACN, 2011);*
- *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006); and*
- *Criteria for Evaluation of Nurse Practitioner Programs [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].*

*A program may select additional standards and guidelines.*

*A program preparing students for certification incorporates professional standards and guidelines appropriate to the role/area of education.*

*An APRN education program (degree or certificate) prepares students for one of the four APRN roles and in at least one population focus, in accordance with the Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).*

#### Program Response:

The mission, goals, and expected program outcomes of United States University (USU) and the College of Nursing (CON) are congruent. The CON Systematic Plan of Evaluation (SPE) documents the expected levels of achievement for student, faculty, and other types of outcomes, the timeframe, and evidence leading to compliance with this standard (Appendix I-A.1: Systematic Plan of Evaluation). Program outcomes include student outcomes, which are differentiated by level, and faculty outcomes. The CON has a singular mission statement that relates to all its nursing programs. The USU General Catalog (2017) demonstrates congruence among the Institutional Mission, Values, and Student Learning Outcomes (p. 10) and the MSN (p.105) and BSN (p. 102) Program Learning Outcomes (PLOs) (<https://www.usuniversity.edu/current-students/university-catalog/>). Additionally, the University's website page devoted to assessment also provides evidence of congruence between university and program goals (<https://www.usuniversity.edu/about/assessment/>).

The following table indicates the congruence between the University's mission and that of the College of Nursing.

University Mission	CON Mission
United States University provides <i>professional and personal educational opportunities, with a special outreach to underserved groups</i> . Through campus and online courses, the University offers affordable, relevant and accessible undergraduate and graduate degree programs and certificates in a supportive student-centered learning environment.	To develop <i>diverse</i> lifelong learners grounded in caring science and prepared to be innovative leaders in a dynamic healthcare system.

The following table displays the congruence between the University Institutional Learning Outcomes (ILO) and the CON MSN and RN to BSN Program Learning Outcomes (PLO).

Institutional Learning Outcomes	MSN Program Learning Outcomes	RN to BSN Program Learning Outcomes
1. Communicate clearly and effectively through writing, speaking and using technology.	1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.  2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.	3. Adapt caring collaborative communication in interacting with patients, families, and the interdisciplinary healthcare team to improve healthcare outcomes.
2. Apply quantitative reasoning to address complex changes	6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.	4. Integrate critical inquiry and evidence based thinking to affect excellence in client care outcomes.
3. Effectively gather, analyze and integrate information from a variety of sources.	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.  6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.  7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.	4. Integrate critical inquiry and evidence based thinking to affect excellence in client care outcomes.  6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.

<p>4. Apply critical thinking in the research and problem-solving processes</p>	<p>3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.</p> <p>5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.</p> <p>6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.</p>	<p>4. Integrate critical inquiry and evidence-based thinking to affect excellence in client care outcomes.</p>
<p>5. Demonstrate ethical reasoning and actions to provide leadership as a socially responsible citizen</p>	<p>2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.</p> <p>4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.</p> <p>7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.</p> <p>8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.</p>	<p>5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.</p>
<p>6. Work effectively across race, ethnicity, culture, religion, gender, and sexual orientation.</p>	<p>5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.</p>	<p>2. Apply nursing process to meet the health-promotion, and disease prevention need of global populations.</p>
<p>7. Work collaboratively as members and leaders of diverse teams</p>	<p>1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.</p>	<p>7. Collaborate with and advocate for consumers and colleagues in the delivery of healthcare services.</p>

	<p>2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.</p> <p>7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.</p>	
8. Exhibit mastery of knowledge and skills within a discipline.	8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.	<p>1. Synthesize theoretical and empirical knowledge derived from the physical and behavioral sciences and humanities as a basis for professional nursing practice.</p> <p>2. Apply nursing process to meet the health-promotion, and disease prevention need of global populations.</p> <p>5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.</p> <p>8. Analyze the application of innovative patient care technology to improve patient care outcomes with the potential to reduce healthcare costs.</p> <p>9. Assume a leadership and advocacy role in promoting individual and global community health and wellness to improve healthcare outcomes.</p>

The following tables indicate the congruence between the MSN PLOs, the *Essentials of Master's Education in Nursing* (AACN, 2011), and the National Task Force on Quality Nurse Practitioner Education (2016) (NTF) criteria, as well as the congruence between the RN to BSN PLOs and the *Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008).

**RN to BSN Program**

USU offers a 36-credit RN to BSN completion program through distance education technologies. It can be completed in one year by full-time students and has 144 hours of clinical internship.

The table below shows the congruence between the RN to BSN PLOs and the *Essentials of Baccalaureate Education for Professional Nursing Practice*.

	<b>AACN Baccalaureate</b>	<b>RN to BSN Program Learning Outcomes</b>
--	---------------------------	--

<b>Essentials</b>		
1	Liberal Education for Baccalaureate Generalist Nursing Practice	1. Synthesize theoretical and empirical knowledge derived from the physical and behavioral sciences and humanities as a basis for professional nursing practice.
2	Basic Organizational and Systems Leadership for Quality Care and Patient Safety	6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.  9. Assume a leadership and advocacy role in promoting individual and global community health and wellness to improve healthcare outcomes.
3	Scholarship for Evidence-based Practice	4. Integrate critical inquiry and evidence based thinking to affect excellence in client care outcomes.  6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.
4	Information Management and Application of Patient Care Technology	3. Adapt caring collaborative communication in interacting with patients, families, and the interdisciplinary healthcare team to improve healthcare outcomes.  8. Analyze the application of innovative patient care technology to improve patient care outcomes with the potential to reduce healthcare costs.
5	Healthcare Policy, Finance and Regulatory Environments	9. Assume a leadership and advocacy role in promoting individual and global community health and wellness to improve healthcare outcomes.
6	Inter-professional Communication and Collaboration for Improving Patient Health Outcomes	3. Adapt caring collaborative communication in interacting with patients, families, and the interdisciplinary healthcare team to improve healthcare outcomes.  7. Collaborate with and advocate for consumers and colleagues in the delivery of healthcare services.
7	Clinical Prevention and Population Health	2. Apply nursing process to meet the health-promotion, and disease prevention need of global populations.  6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.
8	Professionalism and Professional Values	5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.
9	Baccalaureate Generalist Practice	4. Integrate critical inquiry and evidence based thinking to affect excellence in client care outcomes.  5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.

### **Master's Programs**

USU offers three MSN tracks: A 38-credit MSN in Nursing Leadership for Health Systems Management Innovations (NL), a 40-credit MSN in Online Education and Educational Technology (OEET), and a 50-credit MSN Family Nurse Practitioner (FNP) degree. The FNP program is additionally congruent with the Consensus Model for APRN Regulation, Licensure, Accreditation, Certification, and Education (July, 2008).

The table below shows the congruence between the MSN PLOs and the Essentials of Master's Education in Nursing.

	<b>AACN Master's Essentials</b>	<b>MSN Program Learning Outcomes</b>
1	Background for Practice from Science and Humanities	5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.
2	Organizational and System Leadership	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and ensure continuity of patient care.
3	Quality Improvement and Safety	3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.
4	Translating and Integrating Scholarship into Practice	6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.
5	Informatics and Healthcare Technology	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.
6	Health Policy and Advocacy	4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.  7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.
7	Inter-professional Collaboration for Improving Patient and Population Health Outcomes	1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.  8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.
8	Clinical Prevention and Population Health for Improving Health	3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.

		7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.
9	Master's Level Practice	<p>2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.</p> <p>3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.</p> <p>7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.</p> <p>8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.</p>

The table below shows the congruence between the MSN PLOs and the NTF Criteria.

	<b>NTF Criteria</b>	<b>MSN Program Learning Outcomes</b>
1	Scientific Foundations: Critically analyzes; Integrates scientific and humanities; Translates research; Develops new practice approaches.	<p>3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.</p> <p>4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.</p> <p>6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.</p>
2	Leadership: Assumes advanced roles; Provides leadership and collaborates; Uses critical thinking; Advocates for access; Participates in professional organizations.	<p>1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.</p> <p>2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and ensure continuity of patient care.</p> <p>5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.</p> <p>6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.</p>
3	Quality: Uses evidence to continue to improve;	3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing

	Evaluates relationships among cost, access, quality and safety; Evaluates organizational structure; Anticipates variations in practice.	practice of the whole/healthy human being. 4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.
4	Practice Inquiry: Provides leadership; Generates knowledge from practice; Leads practice inquiry; Analyzes clinical guidelines.	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.  4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.  6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.  8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.
5	Technology and Information Literacy: Integrates appropriate technologies; Translates technical information; Demonstrates information literacy; Uses technology systems.	2. Demonstrate leadership and effective management strategies for advanced nursing practice, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.  5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.
6	Policy: Demonstrate understanding of policy and practice; Advocates for ethical policy; Contributes to development of health policy; Analyzes implications of health policy.	4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.  6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to advanced nursing practice.
7	Health Delivery System: Applies knowledge of organizational practices; Minimizes risk to patients; Evaluates impact of healthcare delivery on patients; Collaborates in planning and transitions.	1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.  7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.
8	Ethics: Integrates ethical principles in d-m; Evaluates ethical consequences; Applies ethical solutions.	5. Analyze socio-cultural, spiritual, ethical, economic, and political issues that influence and lead to the highest level of advanced nursing practice.  8. Demonstrate expertise in a culture of caring and engage in

		critical dialogue with a vision for nursing practice in a selected environment.
9	Independent Practice: Demonstrates highest level of accountability; Practices independently; Diagnose and manage patient health needs.	7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.  8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.

I-B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:

- professional nursing standards and guidelines; and
- the needs and expectations of the community of interest.

*Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement.*

**Program Response:**

As noted in I-A, the CON SPE outlines the schedule for periodic review of the mission, goals, and expected student outcomes; CON faculty conducts the needed review and discusses needed revisions during an annual 360° Faculty Retreat. Changes are made when appropriate for student success or because the needs and expectations of the community have changed. The CON's community of interest encompasses students, faculty, alumni, preceptors, clinical agencies and sites, and minority (Black, Filipino, and Hispanic) professional nursing associations.

During the August 2016 360° Faculty Retreat, several changes were made to the MSN PLOs to reflect CON's philosophical and curricula emphasis on the Caring Science framework in a highly technical and changing healthcare environment (Appendix I-B.1: 8/2016 Faculty Retreat Minutes). In the following examples, the bold and struck through print indicates the changes that were made to each of these examples. MSN PLO 2 now reads ***Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.*** MSN PLO 8 now reads ***Demonstrate expertise in a defined area of advanced practice and develop and articulate a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.*** The changes were realigned with the University Mission, the CON MSN PLOs, and the applicable AACN Essentials and NTF Criteria as indicated in the alignment charts in I-A above.

I-C. Expected faculty outcomes are clearly identified by the nursing unit, are written and communicated to the faculty, and are congruent with institutional expectations.

*Elaboration: The nursing unit identifies expectations for faculty, whether in teaching, scholarship, service, practice, or other areas. Expected faculty outcomes are congruent with those of the parent institution.*

**Program Response:**

Expected faculty outcomes were identified by the University and were ratified by the Faculty Senate in 2014. These outcomes were shared with all faculty via email after the ratification and are available in the University Faculty Handbook. The handbook is provided to all new faculty as part of the onboarding process.

The USU Faculty Handbook

([https://secure.projectnurse.com/usuniversity/Courses\\_edit.aspx?i=V5NjrALZ0jw%3d&t=o5izBf1%2bax0UmyHW%2fivdxg%3d%3d](https://secure.projectnurse.com/usuniversity/Courses_edit.aspx?i=V5NjrALZ0jw%3d&t=o5izBf1%2bax0UmyHW%2fivdxg%3d%3d)) identifies Five Domains for Faculty Workload (Chapter 5): Teaching/Advising (70%), Governance (20%), and Scholarly and Creative Contributions, Professional Service, and Community Service (10%). However, because 100% of Core Nursing Faculty are Advance Practice Registered Nurses (APRN), they are required to practice or conduct research at least 20% of their annual time to maintain their national certification. While this might appear to be different than the university's requirement of 10% for Domains 3-5, it was necessary to maintain certification. The USU Faculty Handbook provides opportunity for the Dean to make adjustments to the percentages per domain as needed.

#### **I-D. Faculty and students participate in program governance.**

*Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation. Nursing faculty are involved in the development, review, and revision of academic program policies.*

#### **Program Response:**

Faculty:

The CON core faculty developed and chaired several committees, some of which are unique to the CON. Annually, each committee reports out on committee activity during the 360° Faculty Retreat and new chairs are elected. These committees are key to governance of the CON and all meetings are held and recorded using either telephonic and/or a digital video conferencing platform so that faculty and students who are at a distance may participate. These committees include the following:

- The Faculty Council is a bi-monthly meeting led by the Dean. The meetings are attended by the core faculty, adjunct faculty, the Dean, and other invited guests as appropriate (Appendix I-D.1: Sample Faculty Council Meeting Minutes). The Council discusses university and college updates, discusses potential student issues, and as appropriate any updates from any committee/council. For the first meeting each month, CON students are invited to bring forth any communications or issues from students.
- The Curriculum Committee is currently led by the Associate Dean for Faculty and Research and is attended by the core faculty, available adjunct faculty, the Dean, and other invited guests as appropriate (Appendix I-D.2: Sample Curriculum Committee Meeting Minutes). This Committee reviews and revises syllabi, implements new learning methods brought forth by faculty, and oversees other vital curriculum needs. The Committee meets monthly. CON students are invited to bring forth any curricular issues.
- The Faculty Forum Committee is a faculty meeting lead by the Associate Dean of Faculty and Research and is attended by the core faculty, available adjunct faculty, the Dean, and other invited guests as appropriate (Appendix I-D.3: Sample Faculty Forum Meeting Minutes). The Committee meets at the end of each term (Spring 2, Summer 2, Fall 2) during which attendees discuss the term's courses in depth and consider student evaluation results. Feedback from discussions is forwarded to the Curriculum Committee for review.
- The Bylaws Committee is currently led by the Associate Dean for Academic Affairs and meets during the annual 360° Faculty Retreat as needed. When necessary, it reviews the Bylaws for congruency and leads necessary discussion about it. For example, during the August 2016 360° Faculty Retreat, a change in rules of order was discussed and caused a revision in the bylaws. See screenshot following:

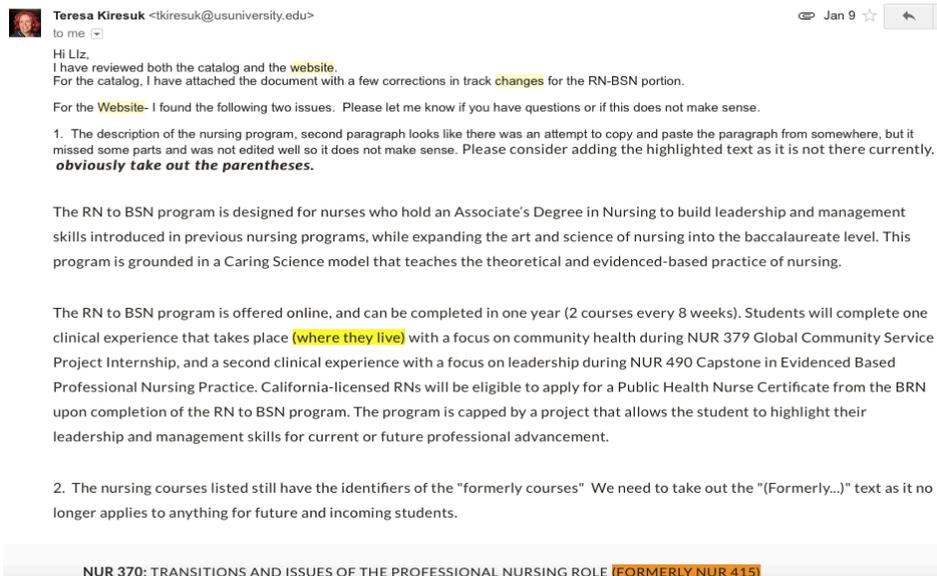
## ARTICLE IV

### Definitions

#### A. Meetings

Meetings of the faculty council and the various committees shall be held as provided in the rules of procedures and shall be conducted in accord to Peggy Chin's Consensus Model (Chin, 2008). ~~and shall be conducted according to Robert's Rules of Order Newly Revised (Robert et al., 2011).~~ The faculty council shall meet a minimum of once a month. All action items shall be distributed to Faculty Council members at least three (3) days prior to a scheduled meeting.

- The Communication Committee is an ad hoc committee currently led by the Director of the RN to BSN program and includes a group of faculty who review CON documents and websites for congruency with any changes made. This additionally includes the university's website, catalog, Nurses Lounge, and other applicable sites. The Committee meets and reports out during the annual 360° Faculty Retreat and submits any changes needed to the Academic Catalog or website to institutional personnel. For example, following the review that occurred during the August 2016 360° Faculty Retreat, the committee discovered the following necessary catalog change with congruency needed for a website update:



**Teresa Kiresuk** <tkiresuk@usuniversity.edu>  
to me

Hi Liz,  
I have reviewed both the catalog and the [website](#).  
For the catalog, I have attached the document with a few corrections in track changes for the RN-BSN portion.

For the [Website](#) - I found the following two issues. Please let me know if you have questions or if this does not make sense.

1. The description of the nursing program, second paragraph looks like there was an attempt to copy and paste the paragraph from somewhere, but it missed some parts and was not edited well so it does not make sense. Please consider adding the highlighted text as it is not there currently. **obviously take out the parentheses.**

The RN to BSN program is designed for nurses who hold an Associate's Degree in Nursing to build leadership and management skills introduced in previous nursing programs, while expanding the art and science of nursing into the baccalaureate level. This program is grounded in a Caring Science model that teaches the theoretical and evidenced-based practice of nursing.

The RN to BSN program is offered online, and can be completed in one year (2 courses every 8 weeks). Students will complete one clinical experience that takes place [\(where they live\)](#) with a focus on community health during NUR 379 Global Community Service Project Internship, and a second clinical experience with a focus on leadership during NUR 490 Capstone in Evidenced Based Professional Nursing Practice. California-licensed RNs will be eligible to apply for a Public Health Nurse Certificate from the BRN upon completion of the RN to BSN program. The program is capped by a project that allows the student to highlight their leadership and management skills for current or future professional advancement.

2. The nursing courses listed still have the identifiers of the "formerly courses" We need to take out the "(Formerly...)" text as it no longer applies to anything for future and incoming students.

NUR 370: TRANSITIONS AND ISSUES OF THE PROFESSIONAL NURSING ROLE **(FORMERLY NUR 415)**

- The Grievances and Academic Integrity Committee is led by the Dean and meets as needed to review any grievances submitted by a CON student through the formal university grievance process. The Committee also discusses any instances of plagiarism or other academic integrity issues that had been resolved between the student, faculty member, and Dean during the year.
- The Policy and Procedure Committee is currently led by the Associate Dean of Academic Affairs (Appendix I-D.4: Sample Policy and Procedure Committee Meeting Minutes). It reviews the CON handbooks and other CON policies for any updates needed. The Committee reports and submits any suggested changes for approval by the Faculty Council and, ultimately, to the university as appropriate.
- The Accreditation and Assessment Special Committee plans to meet annually or as needed. Its purpose is to review documentation pertinent to accreditation and assessment for either CON or USU. It is currently led by the Director of the RN to BSN program. The committee plans to coordinate with the institutional oversight Associate Provost. The Associate Dean for Academic Affairs, who sits on the

university Assessment Task Force, reports out on the CON's work in relation to institutional outcome assessment.

- The EBP Scholarship Committee is a function of the CON's Center for International Nursing Caring and Quality and led by the Director of the MSN-FNP program. This committee supports faculty scholarship including IRB applications and review of conference presentations and peer-reviewed publications.

Following is a screen shot of meeting minutes from the January 2017 Faculty Retreat that indicate the results of the CON committee report outs.

Jan 9, Monday				
Item	Discussion	Action	Responsible Party	Due Date
Meeting in Lab,	<p>Morning Session:</p> <p>1. Bylaws- Annual meeting for all committees? George- 2 standing committees; 3 special Committee Standing-Curriculum; academic policies Confirmed we are within bylaws <del>recommended</del> bylaws change: CC will meet at least 2/term as needed during Academic Year. Academic Policy Com. shall meet at least quarterly, but change to meet twice per year Faculty Council- Shall meet monthly, no change Special committees: Bylaws committee- shall meet 1, Spring 1, 2017 is meeting. Communication Committee- includes web page, catalog, nursing lounge, no change Grievances &amp; Academic Integrity- shall meet 1x/year; no change University Assessment Committee, should have a sub committee- how? <b>Two special committees</b> *Create Accreditation and Assessment Special Committee; -to meet min 1/year as needed during the academic year *CON EBP Scholarship Committee-If help and or support is desired by faculty from faculty. Provide CON representation for IRB. Center for nursing. Who heads these committees for 2017 year: Committee chairs- term is Spring - Spring, with discussion at Fall retreat, effective January 1</p> <p>New chairs: CC-Leaver Faculty Council- McLeod Grievance- McLeod Bylaws- Peraza smith Academic Policy- Peraza-Smith Communication - Teri Accreditation and Assessment Special Committee - Teri EBP Scholarship - Merlie</p> <p>Duties and functions will be developed and reviewed-peraza smith</p> <p>2) Academic policy committee- no further business, handbooks reviewed- close that meeting.</p> <p>3) Communications- ad hoc work, catalog and website review. Continue working on various social media. Nurse</p>			

Faculty responsibilities for participation in institutional governance are outlined in the University Faculty Handbook

([https://secure.projectnurse.com/usuniversity/Courses\\_edit.aspx?i=V5NjrAlZ0jw%3d&t=o5izBf1%2bax0UmyHW%2fivdxg%3d%3d](https://secure.projectnurse.com/usuniversity/Courses_edit.aspx?i=V5NjrAlZ0jw%3d&t=o5izBf1%2bax0UmyHW%2fivdxg%3d%3d)). The CON faculty have been active in the University Faculty Senate. For example, the CON Associate Dean for Academic Affairs/core faculty member is currently the President of the University Faculty Senate and chairs the University Institutional Review Board (IRB); he additionally represents the CON on the institutional Assessment Task Force. The CON Associate Dean for Faculty and Research/core faculty member sits on the IRB and on the University's Re-admit Committee, as well as acts as Recording Secretary for the Faculty Senate. The CON Dean sat of the University's Academic Council until it was dismantled in March 2017 and currently participates in the Faculty Senate when invited. Additionally, since 2014, the Dean has continued to sit on the institution's Academic Strategic Planning Committee.

Students:

The CON has made a special effort to involve students in program governance. Part of the special effort included recommendation from faculty that RN to BSN and MSN student leaders participate in monthly Faculty Council meetings and Curriculum Committee meetings. These students have been regularly participating in these meetings and providing excellent feedback on student issues and curriculum changes, which are documented in the minutes of these meetings (Appendix I-D.5: Sample CON Faculty Council and Curriculum Committee Meeting Minutes with Student Involvement).

Students in turn have been reporting back to their fellow classmates using social media and e-mail. The CON administration has been encouraging the students to provide these reports and comments on our Nurses Lounge (<http://www.nurseslounge.com/lounges/profile/118453/united-states-university>) as it is a more public nursing

professional platform that all our nursing students and alumni are encouraged to join. This site is also where the CON shares updated information about the University and CON activities.

Additionally, all graduate students are encouraged to join the AACN Graduate Nursing Student Academy, a national online professional organization, which permits MSN-FNP students to participate online. This information is given to students via the CON Student Handbook ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_QmFhbFZpVzVSeKU](https://drive.google.com/open?id=0B1qPvc-FYAL_QmFhbFZpVzVSeKU)), Dean's Caring Communication Newsletter ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_Q3RGWGVYb2dta2M](https://drive.google.com/open?id=0B1qPvc-FYAL_Q3RGWGVYb2dta2M)), and in MSN 560 by faculty.

**I-E. Documents and publications are accurate. A process is used to notify constituents about changes in documents and publications.**

*Elaboration: References to the program's offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, grading policies, degree/certificate completion requirements, tuition, and fees are accurate. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate. For APRN education programs, transcripts or other official documentation specify the APRN role and population focus of the graduate.<sup>2,3</sup>*

*If a program chooses to publicly disclose its CCNE accreditation status, the program uses either of the following statements:*

*"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 530, Washington, DC 20036, 202-887-6791."*

*"The (baccalaureate degree in nursing/master's degree in nursing/Doctor of Nursing Practice and/or post-graduate APRN certificate) at (institution) is accredited by the Commission on Collegiate Nursing Education (<http://www.aacn.nche.edu/ccne-accreditation>)."*

#### **Program Response:**

All documents relevant to CON, hard copy and electronic, are reviewed as part of the annual CON 360° evaluation process during the 360° Faculty Retreat. This includes a review of the CON information on the university website and in the Academic Catalog. Accuracy is checked regularly to ensure information is congruent between the catalog and the website. When discrepancies are identified, appropriate personnel are notified and the issue is corrected.

Academic Catalog updates are posted on the USU website as they occur and the new catalog is posted annually at <https://www.usuniversity.edu/current-students/university-catalog/>. The catalog contains references to all institutional academic policies including, but not limited to, the program's offerings, outcomes, recruitment and admission policies, accreditation status, academic calendar, grading policies, degree/certificate completion requirements, tuition, and fees. Information regarding licensure and/or certification examinations for which graduates will be eligible is present in the catalog as well. As revisions might be necessary, the electronic version of the catalog is updated immediately.

Details of the RN to BSN program, including its recommended curricular sequence with pre-requisites, required clinical hours, degree completion requirements, and tuition can be found here:

<https://www.usuniversity.edu/degrees/bachelor-of-science-in-nursing-rn-to-bsn/?pID=85>. Similar details regarding the 3 tracks of the MSN program can be found as follows:

---

<sup>2</sup> *Consensus Model for APRN Regulation: Licensure, Accreditation, Certification and Education (July 2008).*

<sup>3</sup> *Criteria for Evaluation of Nurse Practitioner Programs (National Task Force on Quality Nurse Practitioner Education, 2012).*

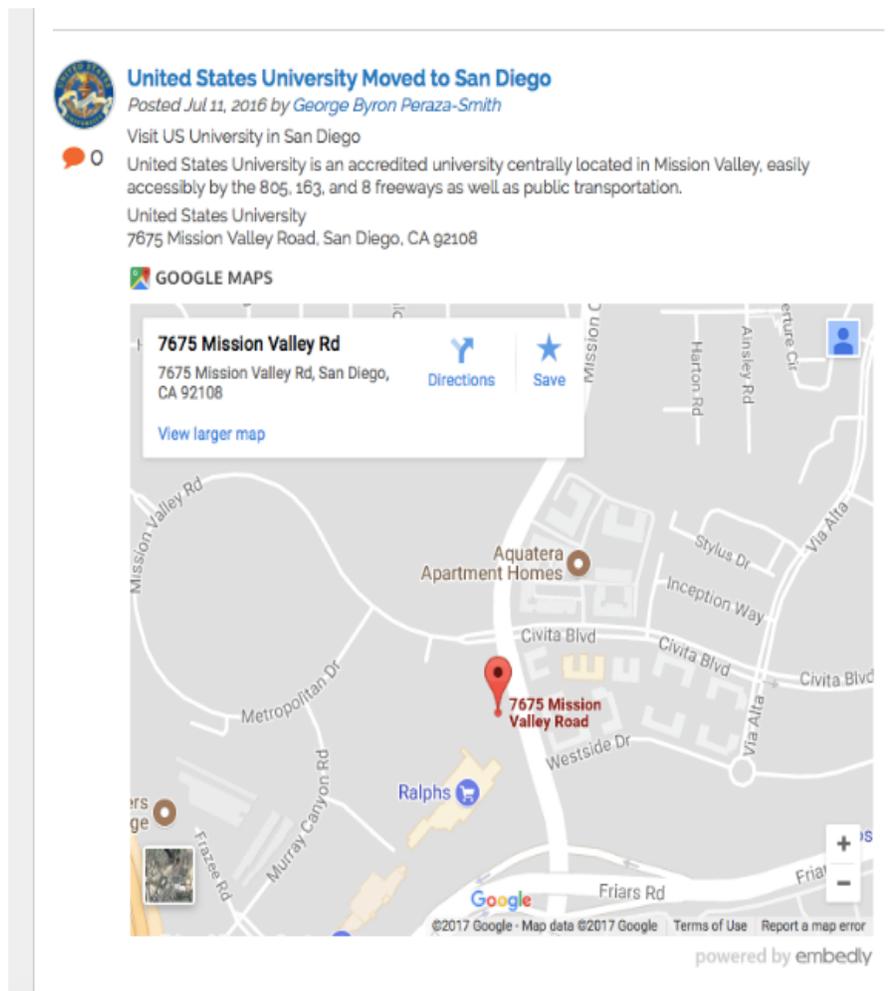
- MSN-FNP: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-family-nurse-practitioner/?pid=85>
- MSN-NL: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-nursing-leadership-for-health-systems-management-innovation/?pid=85>
- MSN-OEET: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-online-education-and-education-technology/?pid=85>

Transcripts and the diploma for the MSN-FNP graduates specify the FNP role (Appendix I-E.1: Sample FNP Transcript and Diploma).

The USU public disclosure of its CCNE accreditation status is found on the USU website at <https://www.usuniversity.edu/about/accreditation/>

The Academic Calendar is published through 2018 and is posted on the USU website: <https://www.usuniversity.edu/current-students/academic-calendar/>

The CON notifies nursing students of any relevant institutional or program changes via direct email, the Dean's Caring Communication newsletter ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_Q3RGWGVYb2dta2M](https://drive.google.com/open?id=0B1qPvc-FYAL_Q3RGWGVYb2dta2M)), or social media such as the Nurses Lounge, or the university's Facebook, Twitter, and LinkedIn sites. Following are examples, two from Twitter, one from LinkedIn, and one via email:



Home Moments Search Twitter Have an account? Log in

**United States Univ.** @USUniversity  
 Tweets 4,706 Following 4,341 Followers 2,196 Likes 678 Lists 4 Follow

**CAN ACCOMPLISH**

United States Univ. @USUniversity · Jul 2  
 Our #RNtoBSN program is 100% online and only \$325/month. Learn more: [bit.ly/2sUrGKK](http://bit.ly/2sUrGKK) #nursing #student #healthcare

As a nurse, we have the opportunity to heal the heart, mind, soul and body of our patients, their families and ourselves.  
 They may forget your name, but they will never forget how you made them feel.  
 - Maya Angelou

New Tab MyWay United States University

Secure | <https://www.linkedin.com/school/1350943/>

United States University  
 2mo

A big thank you for all of our alumni who came out to our College of Nursing Reunion last night! We're so proud of you and glad that you're making a difference in the world. To check out our photos from last night, click here: <https://lnkd.in/g/Pw6TU3>



12 Likes

Like Comment Share

United States University  
 2mo

Are you a proud USU nursing alumni? Join us this Thursday for our first ever nursing alumni reunion! Reconnect with your classmates & professors on our new

12:28 PM 1/1/2017

From: [announcements@usuniversity.edu](mailto:announcements@usuniversity.edu) <[announcements@usuniversity.edu](mailto:announcements@usuniversity.edu)>  
Date: Fri, Jun 2, 2017 at 4:22 PM  
Subject: United States University & Aspen Group Announcement  
To: [pmcutting@yahoo.com](mailto:pmcutting@yahoo.com)

Dear Students,

United States University has submitted a Change in Ownership proposal to its regional accreditor. If approved, the Aspen Group, a post-secondary education company, would replace Linden Education Partners as owners of the university.

The practical impact of the proposed ownership change is reflected in the mission of the Aspen Group: providing any motivated college-worthy students the opportunity to receive a high quality education for the purpose of achieving sustainable economic and social benefits for themselves and their families. Aspen Group Chairman and CEO Michael Mathews, has affirmed Aspen's intention to implement a tuition model through which an affordable monthly payment plan with no interest in lieu of federal financial aid is made available to all United States University students. Such a model will materially relieve our graduates' overall debt burden. As well as providing additional payment options, tuition reductions have also been made in certain programs.

Aspen Group intends to continue operating United States University as an independent, for-profit university governed by its own board of trustees. The proposed Change in Ownership is subject to the regulatory approval of the United States Department of Education, the WASC Senior College and University Commission, and state regulatory and programmatic accreditation bodies.

Regards



Steven A. Stargardter J.D., Ph.D.  
President  
United States University  
7675 Mission Valley Road, San Diego, CA 92108  
[www.USUniversity.edu](http://www.USUniversity.edu)

I-F. Academic policies of the parent institution and the nursing program are congruent and support achievement of the mission, goals, and expected student outcomes. These policies are:

- fair and equitable;
- published and accessible; and
- reviewed and revised as necessary to foster program improvement.

*Elaboration: Academic policies include, but are not limited to, those related to student recruitment, admission, retention, and progression. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. Differences between the nursing program policies and those of the parent institution are identified and support achievement of the program's mission, goals, and expected student outcomes. A defined process exists by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.*

#### Program Response:

The academic policies of USU and the CON are congruent and support achievement of CON's mission, goals, and expected student outcomes. The USU Academic Policies and Procedures are published and accessible at <https://www.usuniversity.edu/current-students/academic-policies-and-procedures/>.

The CON has developed a Policy and Procedures Committee that meets to expand and explain how the USU policies and procedures apply to the CON with the goal that the policies are fair and equitable for nursing students and that they are implemented consistently. The University's policies and procedures and alignment with CON policies and procedures are reviewed per the CON SPE. For example, the University has an attendance policy that was revised in November 2016 and the CON Academic Policy and Procedures Committee outlined the specifics of how this policy change would be implemented in the CON to follow the University policy. The following example indicates the syllabus change that occurred as a result of the institutional policy change:

## ATTENDANCE POLICY

USU is an attendance taking university; attendance is taken at each face-to-face class meeting and weekly for each online course. Requirements for students' attendance and participation are based on the following policy:

- Monday of the first week is considered the first day of class. Students must be in attendance in both campus and online classes by the seventh day of the session. If the student does not attend or participate in the classroom, by the seventh day of the session, the student may be dropped from the course and/or administratively withdrawn from the university.
- Each course will have an initial weekly assignment that must be submitted on-time to be considered in attendance for that week.
- ~~Students must complete the first requirement/assignment within the first week to be considered in compliance with attendance.~~
- In addition, if at any time after the first week of class a student is absent from the university for 14 school days, excluding holidays and scheduled breaks of five calendar

---

05232017092016,  
RML

---



## Course Syllabus

days or more, and no contact has been made by the student indicating intent to continue, the student may be dropped from the course and/or administratively withdrawn from the University.

- Regular attendance is expected for student success. If a student misses more than one onsite class or one week of engagement in an online class, the student may, at the discretion of the instructor, fail the course.

## Standard I Summary

### Areas of Accomplishment

- Strong correlation between the mission and goals of United States University and the mission, philosophy, and strategic goals of CON.
- Comprehensive integration of professional standards and guidelines and *the Essentials of Baccalaureate Education for Professional Nursing Practice*, the *Essentials of Master's Education for Advanced Practice Nursing*, the *California Board of Registered Nurses Rules related to APRN education*, and the *NTF Criteria for Evaluation of Nurse Practitioner Programs* into the curricular initiative of all levels.
- Strong contributory role of USU's Nursing faculty to the organizational and governance structure of the University.

### Areas for Continued Focus

- Ongoing review and modification, as warranted, of integration of the *California Board of Registered Nurses Rules related to APRN education*, *The Essentials of Baccalaureate Education for Professional Nursing Practice* [American Association of Colleges of Nursing (AACN), 2008]; *The Essentials of Master's Education in Nursing* (AACN, 2011); *Criteria for Evaluation of Nurse Practitioner Programs* [National Task Force on Quality Nurse Practitioner Education (NTF), 2012].
  - Action Plan: Review and modify the program based on changes in university strategic direction, professional guidelines, and student outcomes.
- Ongoing review and modification, as warranted, to assure accuracy and currency in academic policies and publications.
  - Action Plan: Continue to review and modify as indicated by established timeframes and documentation procedures to assure continuing accuracy.
- Improve the contributory role of USU's Nursing students in programmatic governance.
  - Action Plan: Using the CON's telehealth equipment, the CON will seek to increase the number of students it invites to join and participate in CON committees on a more regular basis.

## Standard II

### Program Quality: Institutional Commitment and Resources

The parent institution demonstrates ongoing commitment to and support for the nursing program. The institution makes resources available to enable the program to achieve its mission, goals, and expected outcomes. The faculty, as a resource of the program, enable the achievement of the mission, goals, and expected program outcomes.

**II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.**

*Elaboration: The budget enables achievement of the program’s mission, goals, and expected outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the program’s mission, goals, and expected outcomes.*

*A defined process is used for regular review of the adequacy of the program’s fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.*

#### Program Response:

Fiscal and physical resources are currently sufficient to enable the program to fulfill its mission, goal and expected outcomes.

#### Fiscal Resources:

The Dean of Nursing drafts an annual budget which includes salaries, faculty resources, supplies, and curricular resources. The budget is informed with input from historical figures and also the faculty at their 360° Faculty Retreat and is outlined in the SPE. The President, Provost, and Chief Financial Officer review and approve the budget. The table below gives an overview of the dollars allotted to the CON over the past three years. The 2017 calendar year budget detail can be found in Appendix II-A.1: CON Historical Detailed Budget.

**USU College of Nursing Budget**

	2015	2016	2017*
Direct Costs	\$ 1,254,055	\$ 969,196	\$ 948,710
Allocated Overhead	\$ 1,973,810	\$ 1,355,068	\$ 2,042,217

\*Forecasted data

The current pending change in ownership is designed to move USU past any current fiscal difficulties and to become a vibrant university able to meet its institutional mission and goals. Difficult financial decisions have been made based on USU’s past fiscal situation. Due to low enrollment in 2016, a critical review was done of faculty positions and there was a reduction in force to right size the faculty to assure that the student experience continued to be positive. Considering the present situation, fiscal resources have continued to be made available to enable achievement of the USU CON program mission, goals, and expected student and faculty outcomes. One example to indicate the continued adequacy of fiscal resources is the new Skills and Simulation Lab in the new institutional location in Mission Valley. Another example is that, in anticipation of increasing enrollment with the pending change in ownership, the Dean will have the increased opportunity to recruit and retain qualified faculty consistent with program enrollments.

The SPE outlines the process for regular review of the program's fiscal and physical resources and the program's ability to make recommendations for the next budget cycle. Faculty input is solicited annually at the 360° Faculty Retreat.

The process of reviewing and approving the budget is clearly defined. The CON Dean, with input from the core faculty and associate deans at the 360° Faculty Retreat, makes suggestions for needed financial enhancements such as professional development, library acquisitions, simulation lab purchases, or other course technology needs for the following fiscal year. In the Fall, the Dean submits a budget for the upcoming calendar year to the University Provost who reviews it collaboratively. The budget is sent to the CFO for review and any comments and recommendations are provided to the Dean and the Provost. Once appropriate modifications are made, the revised budget is then reviewed by the President. The USU executive leadership team reviews the CON budget. If no further revisions are required, the President presents the consolidated University budget and the specific CON budget with recommendations to the Board of Trustees for approval.

#### Physical Resources:

USU is committed to and supports the nursing program; one way this is evident was the move to a new physical location in July 2016. At this new facility, all classrooms have a Smart Podium, a system that permits Wi-Fi, laptop projection, surround sound audio, and the ability to connect student iPad Minis when needed for instructional strategy. A student lounge and 2 conference rooms were added. The number of nursing-specific classrooms increased from 3 to 7. Additionally, the new space accommodated a newly designed Skills Lab and Simulation area (photos below) as well as better classroom space.





**II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.**

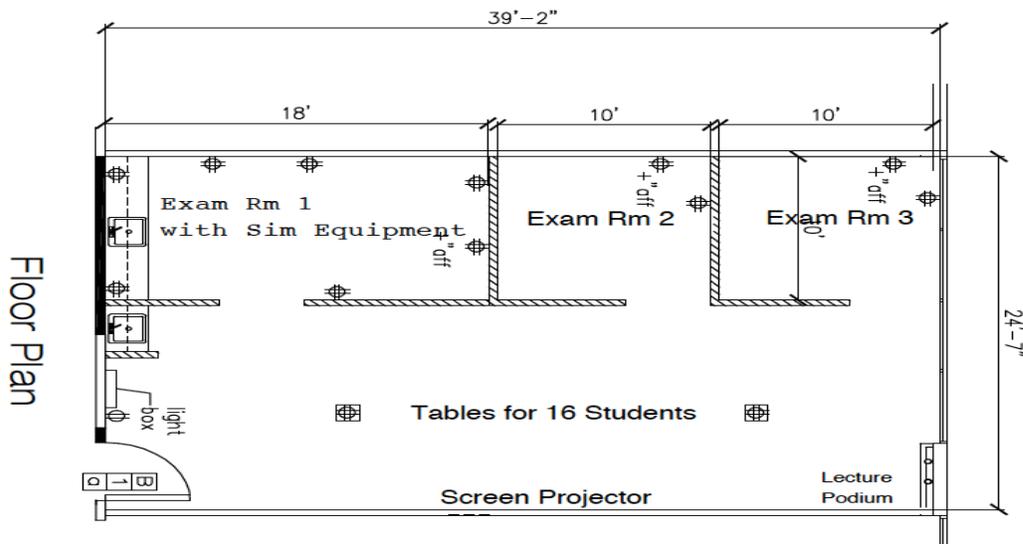
*Elaboration: Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected program outcomes. There is a defined process for regular review of the adequacy of the program's academic support services. Review of academic support services occurs and improvements are made as appropriate.*

**Program Response:**

Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs. Services such as the library, technology, distance education support, admissions, and advising exist to support program and student needs. As part of the Annual 360 Retreat, the adequacy of program academic support services is reviewed.

**Skills and Simulation Lab:**

The laboratory for nursing skills is a modern bright room, equipped with the necessary equipment and technology for FNP students to learn the art and science of the Advanced Health and Physical Assessment across the Lifespan and to learn and practice their required adult and pediatric clinical nursing skills. There are three fully equipped clinical exam rooms within the larger space, one of which holds the telehealth equipment. Following is the Lab's floor plan.



**Academic Support:**

The Student Services Department oversees the maintenance of all student records, admissions criteria, course registration and status changes, and transcript evaluation. The Student Services Department is responsible for reporting student record data within state and federal FERPA guidelines to all external agencies and ensures all department activity complies institutional policies and procedures and verifies completeness and accuracy of all functions. A full description of the USU Support Services is available on p. 26ff in the current Academic Catalog at <https://www.usuniversity.edu/wp-content/uploads/2017/05/USU-Catalog-2017-Master-051817.pdf>. Additionally, for a variety of support services, students can utilize the Student Services Center online at <https://www.usuniversity.edu/current-students/student-services/>.

Admissions advisors officially enroll and work with incoming students for the first 2-week period prior to enrollment census, to help the student adjust to the new learning environment. During this process, students are provided with an Education Plan available in Project Concert which outlines their course sequence, any courses that have been approved for transfer, clinical hours by applicable course, day/time for synchronous sessions, and immersion dates. At course registration, dedicated academic advisors then take over from the admissions advisors who assist students through program progression for each session or as needed. Academic Advisors are available for questions on course sequencing, assisting with students with petition requests, and aiding in general academic questions. The RN to BSN, MSN-FNP, and MSN Program Directors additionally assist CON students with specific programmatic questions applicable to the CON, for example, clinical or nursing career questions.

Career resources include instruction and guidelines for students and graduates in areas such as career planning and job search techniques, resume writing, interview planning and preparation, understanding the importance of networking, completing job applications, characteristics of a professional image, interview follow-up, workplace etiquette, and successfully navigating the workplace. The Academic Catalog is clear, though, that USU does not provide placement services.

**Technology:**

As noted in Standard I, an aspect of CON’s mission is to bring minorities and disadvantaged students into the nursing profession, many of whom are English language learners (ELL). All students admitted to the MSN and RN to BSN programs are provided the Weaver Reading<sup>®</sup> program embedded within the curriculum. The program is meant to improve their English language reading and writing skills and, ultimately, to assist them in being successful in the program. Additionally, all students are provided access to Kurzweil Educational Systems Text-to-Speech software to assist them. Both software programs are available through the iPad Mini provided to MSN-FNP students.

USU provides an onsite computer lab available to students and alumni for extended evening and weekend hours. There are 6 desk tops connected to a printer. Two computers are available to students in the library. All

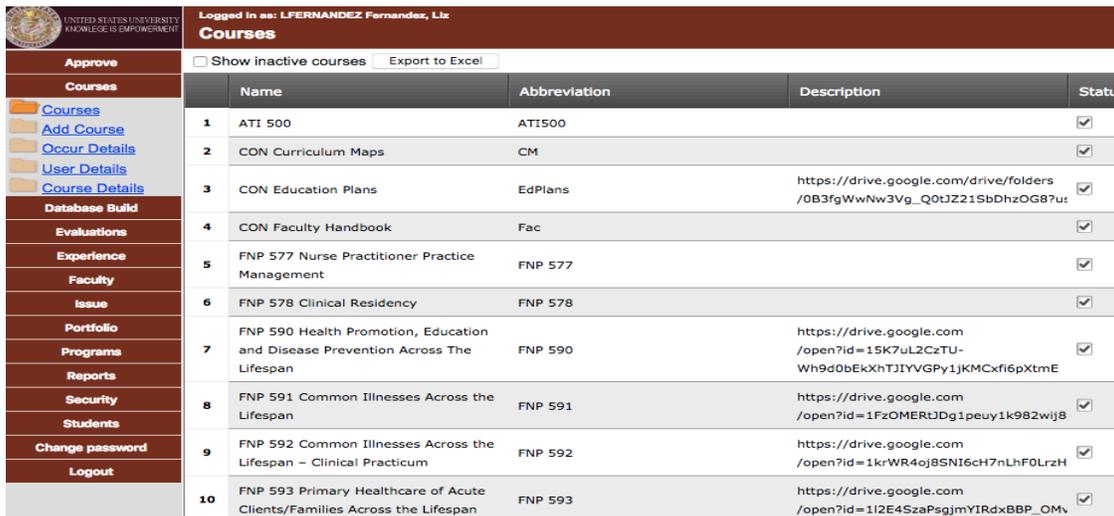
of the desktops have pre-loaded library and university resources to aid student ease of use. There are 20 Chrome Books available for students to checkout from the university's front desk.

There is a Help Desk available to students to assist with any technical issues:

<https://www.usuniversity.edu/current-students/help-desk/>. Students can reach the Help Desk via email (helpdesk@usuniversity.edu), phone (888-422-3381 option 5), or the support site (<https://usuniversity.freshdesk.com>). The Help Desk is manned 8am-5pm Mon-Fri. For software support such as for Project Concert®, students and faculty contact the specific software support line directly. Additionally, students can connect with the Director of Evaluations and Contracts via cell phone during clinical courses.

Project Concert® is the CON's online, secured data management system. For each of the functions of the system identified below, screenshots are included.

(1) Project Concert® houses the final templates of all CON's documents such as course syllabi, handbooks, forms, curriculum maps, and education plans.

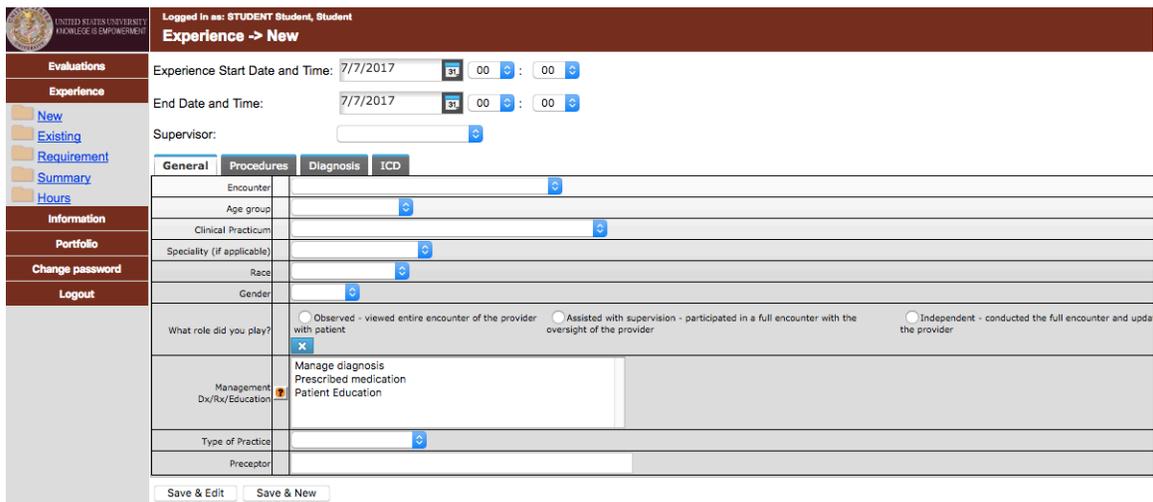


The screenshot shows the 'Courses' page in Project Concert. The user is logged in as LFERNADEZ Fernandez, Liz. The page has a sidebar with navigation options like 'Approve', 'Courses', 'Database Build', etc. The main content is a table of courses.

	Name	Abbreviation	Description	Status
1	ATI 500	ATI500		<input checked="" type="checkbox"/>
2	CON Curriculum Maps	CM		<input checked="" type="checkbox"/>
3	CON Education Plans	EdPlans	<a href="https://drive.google.com/drive/folders/0B3fgWwNw3Vg_Q0tJZ21SbDhzOG8?u...">https://drive.google.com/drive/folders/0B3fgWwNw3Vg_Q0tJZ21SbDhzOG8?u...</a>	<input checked="" type="checkbox"/>
4	CON Faculty Handbook	Fac		<input checked="" type="checkbox"/>
5	FNP 577 Nurse Practitioner Practice Management	FNP 577		<input checked="" type="checkbox"/>
6	FNP 578 Clinical Residency	FNP 578		<input checked="" type="checkbox"/>
7	FNP 590 Health Promotion, Education and Disease Prevention Across The Lifespan	FNP 590	<a href="https://drive.google.com/open?id=15K7uL2CzTU-WH9d0bEkXhTJIYVGPY1jKMCxfi6pXtmE">https://drive.google.com/open?id=15K7uL2CzTU-WH9d0bEkXhTJIYVGPY1jKMCxfi6pXtmE</a>	<input checked="" type="checkbox"/>
8	FNP 591 Common Illnesses Across the Lifespan	FNP 591	<a href="https://drive.google.com/open?id=1FzOMERJDg1peuy1k982wIj8">https://drive.google.com/open?id=1FzOMERJDg1peuy1k982wIj8</a>	<input checked="" type="checkbox"/>
9	FNP 592 Common Illnesses Across the Lifespan - Clinical Practicum	FNP 592	<a href="https://drive.google.com/open?id=1krWR4eJ8SNI6cH7nLhF0LrzH">https://drive.google.com/open?id=1krWR4eJ8SNI6cH7nLhF0LrzH</a>	<input checked="" type="checkbox"/>
10	FNP 593 Primary Healthcare of Acute Clients/Families Across the Lifespan	FNP 593	<a href="https://drive.google.com/open?id=1I2E4SzaPsgjmYIRdxBBP_OMv">https://drive.google.com/open?id=1I2E4SzaPsgjmYIRdxBBP_OMv</a>	<input checked="" type="checkbox"/>

(2) Project Concert® allows students to log all their clinical hours and patient cases, and to pull summary reports of their progress (reports can be run per clinical course or program progress).

Clinical Entry:

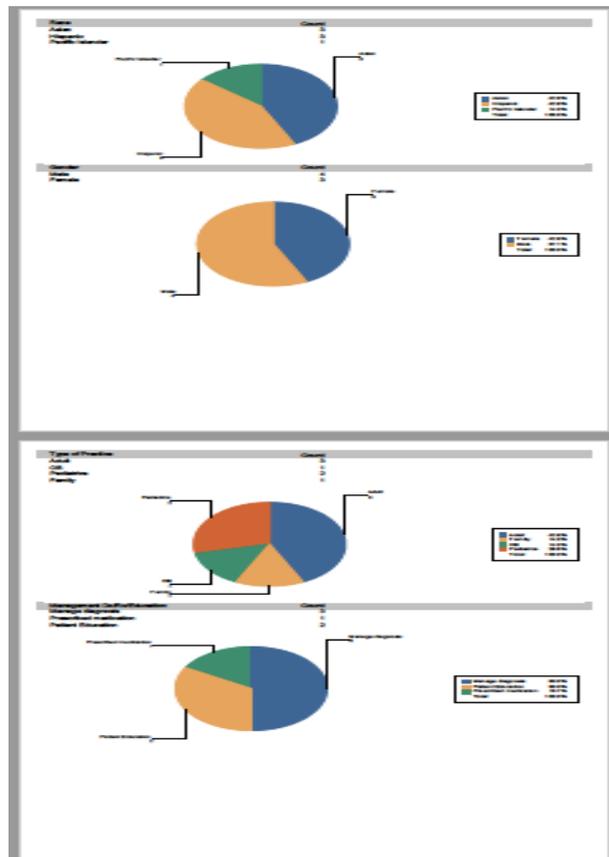


The screenshot shows the 'Experience -> New' form in Project Concert. The user is logged in as a student. The form includes fields for 'Experience Start Date and Time' (7/7/2017 00:00), 'End Date and Time' (7/7/2017 00:00), and 'Supervisor'. Below these are tabs for 'General', 'Procedures', 'Diagnosis', and 'ICD'. The 'General' tab is active, showing fields for 'Encounter', 'Age group', 'Clinical Practicum', 'Specialty (if applicable)', 'Race', and 'Gender'. There are radio buttons for 'What role did you play?' with options: 'Observed - viewed entire encounter of the provider with patient', 'Assisted with supervision - participated in a full encounter with the oversight of the provider', and 'Independent - conducted the full encounter and updated the provider'. There is also a 'Management Dx/Rx/Education' section with a dropdown menu.

Hours Report:

Student	Patient Hours	Clinical Hours			
Student, Student	2.5	22.5			
	Date	Clinical Start Time	Clinical End Time	Patient Hours	Clinical Hours
	7/8/16	12:00 AM	12:00 AM	0	0
		Experience ID	Experience Date	Experience End	Status
		2078	7/8/2016 12:00 AM	7/8/2016 12:00 AM	Approved
	8/30/16	08:00 AM	10:00 AM	1	2
		Experience ID	Experience Date	Experience End	Status
		42462	8/30/2016 8:00 AM	8/30/2016 8:00 AM	Approved
		42463	8/30/2016 9:00 AM	8/30/2016 10:00 AM	Approved
	3/17/17	09:00 AM	05:30 PM	0	8.5
		Experience ID	Experience Date	Experience End	Status
		54381	3/17/2017 9:00 AM	3/17/2017 9:00 AM	Approved
		54382	3/17/2017 5:30 PM	3/17/2017 5:30 PM	Approved
	4/4/17	08:00 AM	08:00 PM	1.5	12
		Experience ID	Experience Date	Experience End	Status
		52920	4/4/2017 8:00 AM	4/4/2017 8:00 AM	Approved
		52923	4/4/2017 8:00 AM	4/4/2017 8:00 AM	Approved
		52922	4/4/2017 9:00 AM	4/4/2017 10:00 AM	Approved
		52925	4/4/2017 10:00 AM	4/4/2017 10:30 AM	Approved
		52921	4/4/2017 8:00 PM	4/4/2017 8:00 PM	Approved
		52924	4/4/2017 8:00 PM	4/4/2017 8:00 PM	Approved
	4/27/17	09:00 AM	09:00 AM	0	0
		Experience ID	Experience Date	Experience End	Status
		54383	4/27/2017 9:00 AM	4/27/2017 9:00 AM	Approved

Summary Report sample of four data sets only:



(3) Project Concert<sup>®</sup> allows students and faculty to complete their course evaluations securely.

The screenshot shows the Project Concert evaluation interface. The top navigation bar includes the university logo and the text "Logged in as: STUDENT Student, Student". The main header is "Evaluations -> Evaluations".

The left sidebar contains navigation options: Evaluations, Experience, Information, Portfolio, Change password, and Logout. The "Evaluations" option is selected.

The main content area displays "Outstanding Evaluations" in a table:

		Evaluatee	Form	Detail	Due Date	Due Status	Form Status	Close
1	Select	Evaluator, Course (noreply@proje	Immersion Orientation Evaluation	(10/19/2015)	11/2/2015	OVERDUE	INCOMPLETE	
2	Select	Evaluator, Course (noreply@proje	Immersion Orientation Evaluation	(1/27/2015)	2/10/2015	OVERDUE	INCOMPLETE	

Below the table, there is a detailed view of an "Immersion Orientation Evaluation" form for the date 10/19/2015, evaluated by Course (noreply@projectnurse.com). The form includes a thank-you message and three sections of questions:

- Overall, how satisfied are you with the immersion/orientation experience?**
  - A. Very satisfied
  - B. Satisfied
  - C. Dissatisfied
  - D. Very dissatisfied
- Did the immersion/orientation experience meet your expectations?**
  - A. Better than expected
  - B. About what expected
  - C. Worse than expected
- Overall, how helpful was the information presented in the sessions?**
  - A. Extremely helpful
  - B. Helpful
  - C. Somewhat helpful
  - D. Not at all helpful

(4) Project Concert<sup>®</sup> allows students to keep their university documents in one location. Individual student's forms, education plan, and contact information are stored in their Information Tab.

The screenshot shows the "Information -> Edit" page for a student. The top navigation bar includes the university logo and the text "Logged in as: STUDENT Student, Student". The main header is "Information -> Edit".

The left sidebar contains navigation options: Evaluations, Experience, Information, Information Edit, Portfolio, Change password, and Logout. The "Information Edit" option is selected.

The main content area displays the student's profile information:

Name: Student [First] [Middle] Student [Last] [Previous Last] [Suffix] [Preferred Name]

Student ID: 123456 Advisor: Ramira, Maria Email(s): student@usuniversity.com

Birthdate: [ ] Age: [ ]

Updated: 1/10/2017 - Fernandez, Liz

Below the profile information, there are several tabs: Programs, Documents, Contact Information, We are excited to learn more!, and Contact / Employment. The "Programs" tab is selected.

The "Programs" tab displays a table of the student's programs:

	Program	Start Date	End Date	Comment	Did not Graduate	Graduation
1	MSN_FNP	01/01/2013	12/31/2018		<input type="checkbox"/>	Cohort 10

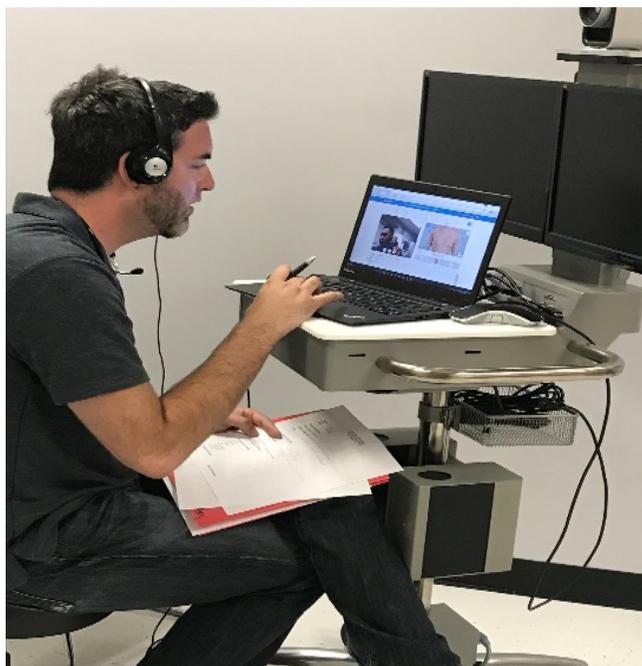


(7) Project Concert<sup>®</sup> allows CON staff to pull regular reports in various formats for the 360<sup>o</sup> evaluation process established by CON and utilized at the annual 360<sup>o</sup> Faculty Retreat.

UNIVERSITY OF NORTH ALABAMA KNOWLEDGE IS EMPOWERMENT			
Logged In as: LPERNADEZ Fernandez, Liz			
Reports			
Approve	Group	Report	
Courses	1 Evaluation	Competency Audit	<a href="#">Generate</a>
Database Build	2 Evaluation	Course Evaluation Completed	<a href="#">Generate</a>
Evaluations	3 Evaluation	Course Evaluation Response Rate	<a href="#">Generate</a>
Experience	4 Evaluation	Course Evaluation Summary	<a href="#">Generate</a>
Faculty	5 Evaluation	Declined Evaluations	<a href="#">Generate</a>
Issue	6 Evaluation	Evaluation Aggregate Summary	<a href="#">Generate</a>
Portfolio	7 Evaluation	Evaluation Answer Set Average	<a href="#">Generate</a>
Programs	8 Evaluation	Evaluation Answer Weight Summation	<a href="#">Generate</a>
Reports	9 Evaluation	Evaluation Comments	<a href="#">Generate</a>
Security	10 Evaluation	Evaluation Competency	<a href="#">Generate</a>
Students	11 Evaluation	Evaluation Completed	<a href="#">Generate</a>
Change password	12 Evaluation	Evaluation Summary	<a href="#">Generate</a>
Logout	13 Faculty	Advisor Passport	<a href="#">Generate</a>
	14 Faculty	Faculty Credential Expiration	<a href="#">Generate</a>
	15 Faculty	Faculty Demographics	<a href="#">Generate</a>

### Telehealth:

The College of Nursing was successful in securing initial (\$115,000 in 2016) and secondary (~\$114,000 in 2107) Song-Brown grants which were used to purchase telehealth technology and software. Song-Brown is a CA healthcare workforce training grant from the Office of Statewide Health Planning and Development (OSHPD). Telehealth technology is taught as a delivery system to all MSN-FNP students. This state of the art equipment demonstrates a variety of ways to deliver health care at a distance. The initial grant permitted the use of the technology to be embedded in the curriculum; all FNP students receive an additional certificate in telehealth upon graduation. There are plans in 2018 to use part of the secondary grant funding to pilot telehealth as an academic evaluation tool which will allow clinical students at a distance to experience a virtual visit from a faculty member. The goal is to increase communication and evaluation between faculty, students, and preceptors. Below is a photo of a student working on the telehealth technology.



## Library:

The USU library is a setting that exemplifies a positive learning environment and mentoring. On the first floor of the new building, the library has been designed to permit student collaboration and work groups. It is a bright open space and presents a welcoming atmosphere. The library is physically adjacent to the student lounge. The library has one textbook on reserve of each course. In some cases, there are copies that the student can check out for 60 days.

The physical facility library is staffed with a Master's prepared Librarian who sits just off the library space for easy access to students. The Librarian provides direction on resources available to incoming students at orientation. The Librarian is available for course-specific support upon request from faculty. She regularly conducts an online synchronous session in which she discusses available online research databases. This occurs in those courses where students begin to work on their capstone research project and continues until they complete it. One-on-one instruction is available for access and use of the online databases and navigation through these resources is also available.

The main library website can be accessed through <http://www.usuniversity.edu/library/>. This site contains general information on services, frequently asked questions and contact information for reaching the Librarian. The second access point through the website search link provides another means of accessing the holdings and online databases. A third access point is available in Blackboard® or D2L shells of every online course. Starting Summer 2015, a library resource information document was located in the Learning Resource tab of every course shell to permit a seamless access to the virtual library for students.

The Electronic Resources Full Text data and holdings of the virtual library can be directly accessed by students and faculty at <http://www.usuniversity.edu/library/library-resources-by-college/full-text-database-nursing/>. Databases for Nursing include Medline Plus, Cinahl Complete, ProQuest Nursing, Allied Health Source, Academic Search Premier, and PsycArticles. Some sites make full text articles available. The Academic Search Premier database, for example, provides 1,715 active titles in the area of Health and Medicine. The full list of nursing databases can be found at <http://www.usuniversity.edu/current-students/library/full-text-database-nursing/>.

QuestionPoint 24/7 Reference® was launched in August 2015. QuestionPoint 24/7 is a reference service that allows faculty, staff, and students to communicate with professional librarians from participating libraries, supplemented by QuestionPoint backup staff for fail-safe coverage. It is a service that ensures our educational community receives trustworthy, real-time, one-on-one reference assistance at any time, from anywhere. Following is a partial transcript of the type of help a QuestionPoint librarian might provide for a faculty member:

Hi, I'm Jonathan, a librarian helping to answer questions for your library. How may I help you?

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:07:56]: Hello, I am searching for nursing article related to acute assessment. How should I stat my search? Medline, CINAHL

[Librarian 12:09:27]: OK, are you able to see the library homepage

<https://www.usuniversity.edu/current-students/library/>

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:09:29]: do you want to know my search terms?

[Librarian 12:10:11]: There are several ways to search. Scrolling down you see: FULL-TEXT DATABASES with links to: NursingHealth Sciences

[Librarian 12:10:31]: Then below that: RESOURCESOnline Resources: Health ScienceOnline Resources: Nursing

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:10:44]: OK, I will start with Nursing.

[Librarian 12:10:49]: Those list the online resources in those subjects the library offers.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:11:23]: Just a minute, OK, I tried nursing, the I went to EBSCO and logged in. my search terms are acute respiratory assessment, medical history, culture. I am looking for an article on history taking of acute respiratory health and culturally competent care.

[Librarian 12:18:15]: OK, you want to start with Keyword searches for as few key terms as possible, then see what Subject terms are used to classify useful material, as possibilities for further, more focused searching.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:18:23]: I think I need to be more specific with the search terms.

[Librarian 12:20:54]: My initial PubMed search for - Acute Respiratory Care AND History Taking AND Cultural Competence - doesn't find any useful results, so I think we need to use fewer terms.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:21:04]: So, I put in assessment, inhaler and hispanic let me see what I can find.

[Librarian 12:21:15]: Even a search just for - Acute Respiratory Care AND Cultural Competence - finds only 5 results.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:21:22]: Oh wait. So what I am really looking for is compliance.

[Librarian 12:21:35]: A search for - Respiratory Care AND Cultural Competence - finds 34.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:21:55]: When I went into EBSCO I went to CINAHL.

[Librarian 12:22:28]: I started with the public version of PubMed as that's the largest, to get an idea of what might be available. Then a useful approach next, is to look at the reference list in any useful articles. 2. Health literacy, cognitive function, proper use, and adherence to inhaled asthma controller medications among older adults with asthma. Yes, I agree about using the reference list. That is a really good tip. For this article I have the abstract. will go back and see if I can find anything full text and use the reference lists. I am good now. Thank you for your support. I think I can take it from here. Any other suggestions other than using the reference list before I go? What about Bionmed Central?

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:26:46]: Do you know why they call it Boolean Phrase

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:29:09]: Pathways linking health literacy, health beliefs, and cognition to medication adherence in older adults with asthma.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:29:22]: I found this article. Perfect. I am good. This has been a great help.

[Librarian 12:30:18]: 'Boolean' is an abstract algebraic systems term, named for George Boole (1815-1864), English mathematician.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:30:31]: Thank so much. And, Boolean is a computer phrase for programing.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:30:35]: Again, thanks.

[Cynthia A. Leaver, PhD, APRN, FNP-BC 12:30:44]: Patron ended chat session.

#### Online Classroom:

As a result of the pending change of ownership, USU has switched its distance learning management platform from Blackboard, which it has used since 2014, to the Desire 2 Learn (D2L) learning platform for the CON. All new students beginning in July 2017 are using D2L. Existing students are being migrated on a schedule to D2L; however, 2017 graduates will finish out in the Blackboard system. In addition to the curriculum, the D2L learning platform itself supports student achievement and engagement. Faculty can put an individual stamp on the environment of a course using tools provided within the platform. For example, they can add video and graphics or they can provide assignment feedback via audio. By posting a link to a personal online meeting room like Zoom, Google Hangouts, and Adobe Connect, faculty can make themselves available during virtual office hours for face-to-face meetings. They can add articles or YouTube links to provide additional learning resources. They can use web tools such as Screencast-o-Matic and PollEverywhere to engage their learners for immediate feedback in discussion boards. They can create micro-lectures using YouTube or VoiceThread. The D2L platform provides an opportunity for faculty to teach the way they want, enhancing their academic freedom with prescribed curriculum.

Once the course is loaded into D2L, it is enhanced with images and embedded multimedia resources to increase student engagement and interest within the dynamic learning environment. Following are two screen shots showing how the curriculum is implemented within the learning environment for students.

Search Topics

Week 7 Print

CLO(s)	Topics Covered	Learning Activities
4	Financial, Ethical, and Legal Issues of APN	<p><b>Readings:</b></p> <ul style="list-style-type: none"> <li>Joel – Chapter 24 – Starting A Practice and Practice Management   Chapter 25 – The APN as Employee or Independent contractor; Legal and Contractual Considerations   Chapter 26 – The Law, the Court, and the APN   Chapter 27 – Malpractice and the APN   Chapter 28 – Ethics and the APN</li> </ul> <p><b>Assignments Submissions:</b></p> <ul style="list-style-type: none"> <li>Goals</li> <li>Quiz 7 – Chapters 24 – 28</li> <li>Reflection Journal</li> </ul> <p><b>Synchronous Activities:</b></p> <ul style="list-style-type: none"> <li>Virtual Class TBA</li> </ul>

Download

0 % 0 of 8 topics complete

**Week 7: Goals**

**Summary:** Practicing personal and profession reflection are core principles of Jean Watson's Caring Science Theory. Reflective practice allows us to grow and to develop a better understanding of ourselves and our practices. Setting weekly goals provides purposeful planning and consequential reflection upon the evaluating the journey and achievement of those goals at the end of the week.

**Directions:**

- The student will download the Weekly Goals form. (Click File>Download as .xlsx)
- The student will identify at least two learning goals for the week focusing on the course readings, assignments and course objectives.
- Save the file with Student First Name\_Last Name\_Weekly\_Goals
- Submit completed form each **Tuesday** by **11:59 PM PST** to the D2L assignment dropbox.

**Week 7: Goals Upload**

**When you are ready to submit your work, do the following:**

- If you don't see "Submissions" below, find the Dropbox submission for this Week.
- When you submit your assignment it goes through Turnitin, a plagiarism software, to be sure that your work is less than 20% duplicated from other sources unless otherwise noted. Take the time to correct it so the report verifying your work is less than 20% or as required by your instructor. You may edit your submission and resubmit it up to three times or per your instructor's directions.
- Submit your assignment by dragging the file into the Dropbox on top of the "Drop files here" or click on the Upload button, navigate to the file, and upload it.

**Week 7: Reflective Journal**

**Prompt:** Reflections on the significance of purchasing and maintaining my own malpractice insurance.

**Summary:**

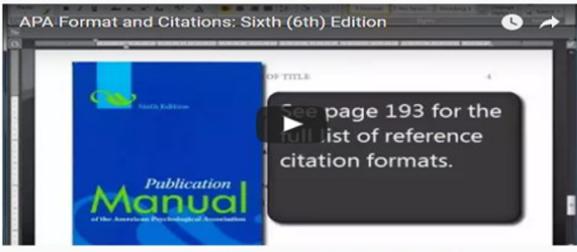
The journal is intended as a reflection on your experience with the course material and exploration of pertinent APN issues. Journaling allows students to express thoughts and feelings regarding aspects of their weekly discovers with the course content. Journaling offers the student the opportunity to exercise the Theory of Caring Science by becoming more centered and aware of one's consciousness and state of presence.

**Directions:**

- You are expected to journal at least one page (single spaced) for each week of Week 1, 3, 5, 7. You may choose to journal more, if you wish.
- You should address and reflect the Reflection Topic assigned for each week. You will not be graded on the content of the journal, as long as it is relevant to the reflections guided topic for the week.

**Week 4: Resource(s)**

**APA Format Citation**



Source Link: <https://www.youtube.com/watch?v=9pbUoNa5tYY>

**Week 4: Discussion Question**

**Prompt:** Discuss the influence of the Consensus Model for APRN: LACE. Why is it important? Support your discussions with at least two current scholarly articles (less than 5 years), Consensus Model Retrieved December 31, 2014 from Consensus Model for APRN Regulation

**Directions:**

- At the beginning of the discussion board, a question will be posted.
- Each student is expected to craft an initial post of **400 words** or more by **Tuesday, 11:59 pm PST** in a new thread that refers to relevant course readings. Discussion board posts should incorporate personal experiences in addition to course content.
- Continue the discussions throughout the week by reading everyone's posts, including all instructor posts, and responding to the posts of others (a minimum of two additional responses of **200-300 words** per discussion thread required by **Saturday, 11:59 pm PST**). As in a physical classroom, some of the best learning moments can come from the back and forth of conversation.
- Each Student is to make a final reflection post of **200 words** by **Sunday, 11:59 pm PST**. The student is to reflect on the discussion and summarize their own learning from the week's discussion. Please start a new thread for the reflection post and label the thread "Reflective Post."
- Your final discussion grades will be assessed based on the entirety of your contribution to each conversation, not just the answers to the initial questions.

**Week 4: Interview with an APN Leader**

**Summary:**

The student will interview a nurse practitioner who is or has served in a leadership role. Leadership roles may include but are not limited to, association leader, policy leaders, member of a practice or health care committee, member of a board of directors for an association, hospital or clinic, manager or leader of other providers, community leader, etc. The APN leader may be a local, state or national leader. The APN must be either a Nurse Practitioner, Clinical Nurse Specialist or a nurse with a DNP.

**Directions:**

- Contact an APN leader from the community.
- Obtain approval from the course instructor. Send an email to the instructor with the name, title and information on the APN leader's leadership role(s).

#### II-C. The chief nurse administrator:

- is a registered nurse (RN);
- holds a graduate degree in nursing;
- holds a doctoral degree if the nursing unit offers a graduate program in nursing;
- is academically and experientially qualified to accomplish the mission, goals, and expected program outcomes;
- is vested with the administrative authority to accomplish the mission, goals, and expected program outcomes; and
- provides effective leadership to the nursing unit in achieving its mission, goals, and expected program outcomes.

*Elaboration: The administrative authority of the chief nurse administrator is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest to make decisions to accomplish the mission, goals, and expected program outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale and a plan to come into compliance if the chief nurse administrator does not hold a graduate degree in nursing and a doctoral degree (if applicable).*

#### Program Response:

USU has delegated the administrative authority of the College of Nursing to Dr. Renee McLeod, PhD, APRN, CPNP, FAANP (Appendix II-C.1: Dean's CV). It is her responsibility to accomplish the mission, goals, and expected outcomes of the nursing program. The USU Organizational Chart displays how the Dean of Nursing's administrative authority is equivalent to other academic leaders at USU (Appendix II-C.2: USU Organizational Chart). Dr. McLeod is a well-respected nursing leader in the state of California and participates on numerous committees and task forces related to advancing the profession of nursing. She also represents USU's CON on a variety of local, regional, national, and international committees and boards. For example, she has served as National President and National Clinical Practice Chair for the National Association of Pediatric Nurse Practitioners (NAPNAP). In Korea and Russia, she has also presented and discussed the status of nursing in the United States and the implementation of technology in nursing and nursing education. She is also a practicing APRN and dedicates one day a week to her practice. Her background includes Associate Dean for Graduate Programs at Arizona State University and founding dean for the Brandman College of Nursing and Health Professions, which is part of the Chapman University system in Irvine, CA. Dr. McLeod joined the USU team in July 2014 and has been responsible for leading the college to integrate the Caring Science approach into the nursing curricula. In addition to making curricula changes, Dr. McLeod led the University through initial CCNE accreditation.

#### II-D. Faculty are:

- sufficient in number to accomplish the mission, goals, and expected program outcomes;
- academically prepared for the areas in which they teach; and
- experientially prepared for the areas in which they teach.

*Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The overall faculty (whether full-time or part-time) is sufficient in number and qualifications to achieve the mission, goals, and expected program outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.*

*Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a rationale for the use of any faculty who do not have a graduate degree.*

*Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks are directly overseen by faculty who are nationally certified in that same population-focused area of practice in roles for which national certification is available.*

#### **Program Response:**

The faculty are sufficient in number to accomplish the mission, goals and expected program outcomes. As the nursing programs at USU have decreased in enrollment, the number of faculty have been adjusted to provide sufficient academic faculty. As was expected as a result of the pending change of ownership, CON enrollment has dramatically increased and the program will again ensure sufficient faculty to teach. For example, in the MSN-FNP program, enrollment in January 2017 was a cohort of 6 students; in July, a cohort of 27 students was admitted. The CON currently maintains the following core positions: Director of the RN-BSN, Director of the MSN-FNP, and two Associate Deans (one of whom acts as Director of the MSN-NL/OEET), who are full time faculty with an additional administrative assignment added to their workload (Appendix II-D.1: Faculty Job Descriptions; Appendix II-D.2: CON Organizational Chart).

It is the responsibility of the Dean to orientate all faculty to their role, responsibilities, and expectations for participation in CON programs, faculty governance, professional development, and community service as set out in the USU Faculty Handbook (2016-17 Handbook: [https://drive.google.com/open?id=0B1qPvc-FYAL\\_MDVYtEtRY1dUcUk](https://drive.google.com/open?id=0B1qPvc-FYAL_MDVYtEtRY1dUcUk) ). The formula for calculating FTEs and faculty workload can also be found in Chapter 5 of this document. CON faculty abide by the workload policy set forth in the USU Faculty Handbook. However, core nursing faculty at all ranks will teach 2 courses per session with release time for administration or other assigned duties. It is recognized that clinical courses in the FNP track meet the national standard of a 1:6 faculty to student ratio. After core faculty are issued their teaching load, part-time faculty are employed to teach in their area of expertise; they are operationally governed by the USU Adjunct Faculty Handbook ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_ekRIQmVEX205cWs](https://drive.google.com/open?id=0B1qPvc-FYAL_ekRIQmVEX205cWs) ). It should be noted that, with the transition related to the pending change in ownership, CON faculty have been willing to go above and beyond in their course loads.

There are currently three full time and one part-time Core Faculty. Each core full time faculty assumes administrative functions within the CON either as an associate dean or as a program director. Full time Core Faculty in the CON are prepared at the doctoral level, hold required certification; several of the adjunct faculty hold terminal degrees. One of the associate deans is a Certified Nurse Educator. The Dean, the Associate Dean of Academic Affairs, and Director of the RN to BSN are Quality Matters Certified. All faculty hold a current California RN license and an RN and advanced practice license or certification in their home state. All faculty have graduate degrees and many hold specialty certifications (Appendix II-D.3: Faculty Qualifications, Experience, and Course Assignments).

**II-E. Preceptors, when used by the program as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.**

*Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are:*

- *clearly defined;*
- *congruent with the mission, goals, and expected student outcomes; and*
- *congruent with relevant professional nursing standards and guidelines.*

*Preceptors have the expertise to support student achievement of expected outcomes. Preceptor performance expectations are clearly communicated to preceptors and are reviewed periodically. The program ensures preceptor performance meets expectations.*

### **Program Response:**

USU ensures that Preceptors are qualified to mentor students. The CON Preceptor Handbook ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_TTdkY2paVjNHVW8](https://drive.google.com/open?id=0B1qPvc-FYAL_TTdkY2paVjNHVW8)) clearly delineates Preceptor qualifications and expected outcomes for student and preceptor. CON reviews its preceptor applicants to ensure they are authorized to practice in the state or currently licensed as a health care professional as required by state regulations, have a minimum of 2 years of practice experience, maintain a current unencumbered license in the specialty when required for the role, and maintain a professional certification, if required or appropriate. All Preceptors participate in an orientation that discusses the mission, goals, and expected student outcomes. The CON Preceptor Handbook is used to orient newly qualified Preceptors to the role of preceptor and CON expectations to facilitate a successful clinical experience for students. For clinical preceptor sites that need initial approval, the Clinical Placement Coordinator, in consultation with FNP Program Director and the Dean, approves the site. When a student has been assigned to a site, if appropriate or necessary, the clinical faculty member contacts the site for additional feedback or to address a particular issue.

Students enter their clinical experience with learning goals and objectives that can be accomplished in the identified setting. In the clinical setting, the preceptor orients the student to the processes, procedures, and assists in selecting patients/clients who will allow them to meet their learning objectives. The setting serves as a learning environment for a session of 8 weeks and reflects the learning needs and capacity of the clinical setting.

In spite of the decrease in student enrollment in 2016, and to ensure students' timely progression through the program in a highly competitive environment, one full-time position that was maintained was that of Clinical Placement Coordinator. While the applicable Program Director is responsible for reviewing and approving all preceptors for all programs, the Coordinator works directly on obtaining clinical sites, acquiring affiliation agreements, verifying insurance requirements, and confirming that students meet the requirements prior to placement. It is anticipated that with the pending change of ownership and expected increase in enrollment, there may be a need for an additional Clinical Placement Coordinator.

### **II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.**

*Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected faculty outcomes. For example:*

- *Faculty have opportunities for ongoing development in the scholarship of teaching.*
- *If scholarship is an expected faculty outcome, the institution provides resources to support faculty scholarship.*
- *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles that require it.*
- *If service is an expected faculty outcome, expected service is clearly defined and supported.*

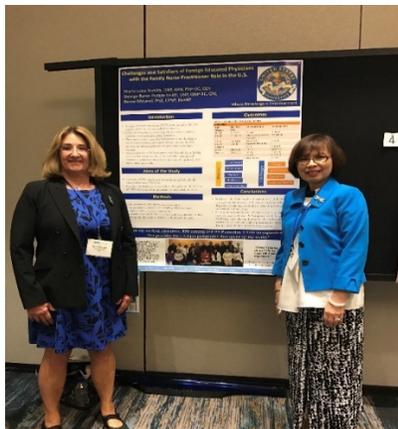
### **Program Response:**

USU supports an environment that encourages faculty teaching, scholarship, service, and practice in keeping with mission, goals, and expected faculty outcomes. Full-time core faculty are provided institutional support in the form of workload release time to maintain an active clinical practice, attend professional conferences, and maintain competence. This allows the FNP faculty to stay certified and up-to-date in their field and brings the latest practice and technology into the classroom.

The CON has developed the Center for International Nursing Caring and Quality (CINCQ) (Appendix II-F.1: CINCQ Flyer). The purpose of the virtual Center is to provide support for both faculty and student research. The Center offers grant writing, IRB assistance and review, and data analysis support. The mission of the Center is to support collaboration among communities of interest for scholarship that fosters a caring science approach

to advance high quality of care both nationally and internationally. The Center is staffed by the faculty of the CON and invited local and international experts in their field and is directed by the Associate Dean for Academic Affairs for the CON.

In 2016, the Center supported the Director of the FNP Program in a scholarly research project. The support included suggestions for the development of the research project and literature review, review of the IRB submission, review and recommendations on the survey that was conducted and help with a focus group. The research was conducted and the findings were presented by the Dean and one of the faculty at the GANES International Conference in April 2017 in a poster session entitled *Challenges and Satisfiers of Foreign Educated Physicians with the Family Nurse Practitioner Role in the United States* (Appendix II-F.2: GANES Poster).



Additionally, the Center was instrumental in assisting the faculty and the Dean with the submission of two articles in peer-reviewed journals. For the *Journal of Nursing Education*, the article is entitled *Promoting Diversity through Holistic Admissions and Retention: Small School, Big Results*; it is currently in the revision process. The other, to the *Journal of Cultural Diversity*, is entitled *Exploring Foreign Educated Physicians Graduating from a Family Nurse Practitioner Program*.

In addition, the CON changed the title and job description of the Associate Dean for Faculty to the Associate Dean for Faculty and Research. This faculty member has a research Doctorate (PhD), has completed a postdoctoral fellowship at the National Institutes of Health (NIH), and provides research and statistical expertise to fellow faculty and students.

## Standard II Summary

### Areas of Accomplishment

- Highly accomplished dynamic faculty and administrative leadership in the CON. Faculty are academically prepared to execute CON programs.
- Appropriate financial and physical resources that enhance academic and scholarly outcomes for students and faculty.
- Sufficient academic support services to ensure a positive educational experience for students.

### Areas for Continued Focus

- Based on expected increases in student enrollment, the CON plans to increase qualified faculty and preceptors to meet student needs.
  - Action Plan: The Dean will monitor and assess the need to hire additional adjunct and full-time faculty.
  - Action Plan: The Dean will develop a preceptor credentialing system.
- Ongoing analysis of fiscal and physical resources to ensure the needs of CON students are met.
  - Action Plan: The Dean will monitor and recommend budgetary increases as needed to support CON growth.

## Standard III

### Program Quality: Curriculum and Teaching-Learning Practices

The curriculum is developed in accordance with the program's mission, goals, and expected student outcomes. The curriculum reflects professional nursing standards and guidelines and the needs and expectations of the community of interest. Teaching-learning practices are congruent with expected student outcomes. The environment for teaching-learning fosters achievement of expected student outcomes.

**III-A. The curriculum is developed, implemented, and revised to reflect clear statements of expected student outcomes that are congruent with the program's mission and goals, and with the roles for which the program is preparing its graduates.**

*Elaboration: Curricular objectives (e.g., course, unit, and/or level objectives or competencies as identified by the program) provide clear statements of expected learning that relate to student outcomes. Expected outcomes relate to the roles for which students are being prepared.*

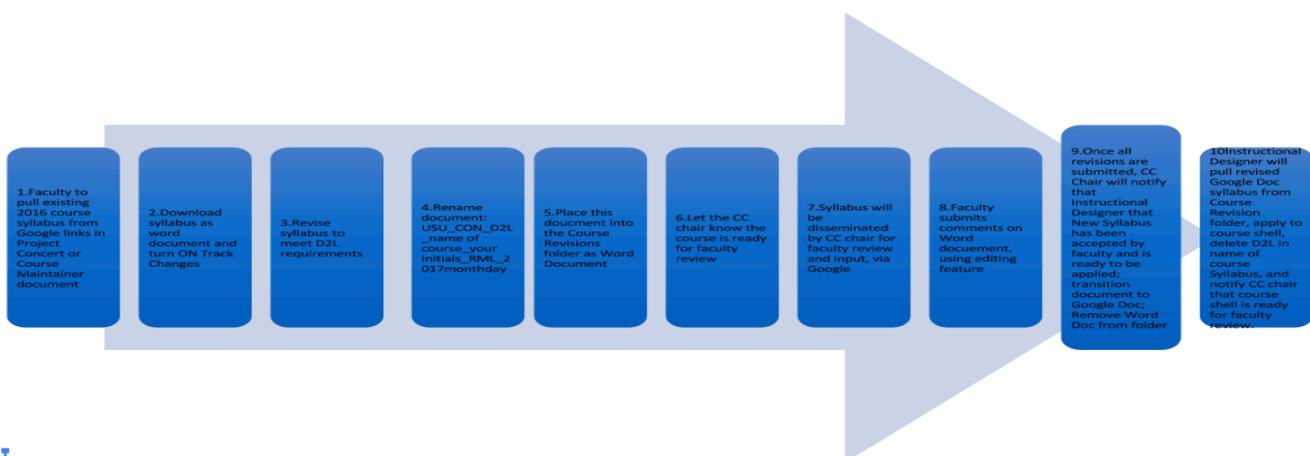
#### Program Response:

The mission of the CON is to "develop diverse lifelong learners grounded in Caring Science and prepared to be innovative leaders in a dynamic healthcare system." The BSN and MSN Program Learning Outcomes (PLOs) are consistent with the CON mission and goals (see Standard 1-A).

With the advent of a new CON Dean and new faculty in 2014, a comprehensive program review of the MSN and RN/BSN programs was completed to bring both programs into CCNE compliance. It included a complete curricular review prior to the teaching of each course. These reviews informed the MSN Self Study in 2014 and the BSN Self Study in 2015. For university program review purposes, these self-studies were accepted as the program review for CON programs in 2014 and 2015. Once these were accepted, CON was included in the regular program review schedule for the university (see chart in Standard IV-A).

It was decided to teach out the Accelerated Bachelors of Science Degree (ASBN) that was an arm of the Entry Level Masters (ELM) Degree program. In September 2015, the CON graduated the last cohort from the ASBN. In a letter to the California Board of Registered Nursing (BRN) dated August 22, 2016, USU nursing leadership requested closure of the ELM/ASBN program in good standing (Appendix III-A.1: BRN ASBN Closure Request Letter). On November 10, 2016, the BRN acknowledged closure of the entry level master's program and the program's end in good standing (Appendix I.5: BRN ASBN Closure Acknowledgement Letter).

The CON uses a 10-step curriculum course review process as summarized in the graphic below. Appendix III-A.2: Curriculum Course Review Process is the narrative that details this graphic.



T

**RN to BSN Program:**

The online 36 credit RN to BSN option is 100% online and was developed, implemented, and revised to reflect clear statements of individual student learning outcomes that are congruent with the program's mission, goals, and roles for which the program is preparing students. This program of study has clearly stated program outcomes that articulate the expectations of graduates. Course Learning Outcomes (CLOs) link to program outcomes for the RN to BSN program and are detailed in the objectives for each course, clearly evident on syllabi.

As part of the 360° evaluation process implemented at the 360° Faculty Retreat in July 2015, the CLOs were reviewed for consistency with course title and description, redundancy with other courses, and alignment with the *Essentials of Baccalaureate Education for Professional Nurses (AACN 2008)* (Appendix III-A.3: 7/2015 Faculty Retreat Minutes). The RN to BSN Program of Study was revised in Summer 2015 and can currently be found at <https://www.usuniversity.edu/degrees/bachelor-of-science-in-nursing-rn-to-bsn/?pID=85>. Additional reviews occurred in August 2016 and January 2017 at the associated Retreats.

**MSN Programs:**

USU offers three programs that lead to a Master's of Science in Nursing (MSN): a 38-credit MSN in Nursing Leadership for Health Systems Management Innovations (<https://www.usuniversity.edu/degrees/master-of-science-in-nursing-nursing-leadership-for-health-systems-management-innovation/?pID=85>), a 40-credit MSN in Online Education and Educational Technology (<https://www.usuniversity.edu/degrees/master-of-science-in-nursing-online-education-and-education-technology/?pID=85>), and a 50-credit MSN Family Nurse Practitioner degree (<https://www.usuniversity.edu/degrees/master-of-science-in-nursing-family-nurse-practitioner/?pID=85>). The MSN programs were developed, implemented, and revised to reflect clear statements of learning outcomes that are congruent with the program's mission, goals, and roles for which the program is preparing students. The programs align with both the *Essentials of Master's Education in Nursing (AACN, 2011)* and the NTF Criteria (see Standard I.A).

Each CON syllabus lists the Program Learning Outcomes (PLOs) and the Course Learning Outcomes (CLOs) as applied to the individual course (Appendix III-A.4: Program Syllabi Link Chart). The part-time Instructional Designer and the faculty subject matter expert review each syllabus prior to a course being taught the first time to ensure continuity and accuracy of format and content as appropriate to their roles. At the annual 360° Faculty Retreats, the mission, goals, PLOs, and CLOs are all reviewed at a college level for continued compliance with the California state recommendations, the AACN Essentials, and the requirements of other accrediting and regulating bodies.

**III-B. Curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within the expected student outcomes (individual and aggregate).**

- Baccalaureate program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008)*.
- Master's program curricula incorporate professional standards and guidelines as appropriate.
  - a. All master's degree programs incorporate *The Essentials of Master's Education in Nursing (AACN, 2011)* and additional relevant professional standards and guidelines as identified by the program.
  - b. All master's degree programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs (NTF, 2012)*.
- Graduate-entry program curricula incorporate *The Essentials of Baccalaureate Education for Professional Nursing Practice (AACN, 2008)* and appropriate graduate program standards and guidelines.
- DNP program curricula incorporate professional standards and guidelines as appropriate.
  - a. All DNP programs incorporate *The Essentials of Doctoral Education for Advanced Nursing Practice (AACN, 2006)* and additional relevant professional standards and guidelines if identified by the program.

b. All DNP programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

- Post-graduate APRN certificate programs that prepare nurse practitioners incorporate *Criteria for Evaluation of Nurse Practitioner Programs* (NTF, 2012).

*Elaboration: Each degree/certificate program incorporates professional nursing standards and guidelines relevant to that program, area, role, population focus, or specialty. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.*

*APRN education programs (degree and certificate) (i.e., Clinical Nurse Specialist, Nurse Anesthesia, Nurse Midwife, and Nurse Practitioner) incorporate separate comprehensive graduate level courses to address the APRN core, defined as follows:*

- *Advanced physiology/pathophysiology, including general principles that apply across the lifespan;*
- *Advanced health assessment, which includes assessment of all human systems, advanced assessment techniques, concepts and approaches; and*
- *Advanced pharmacology, which includes pharmacodynamics, pharmacokinetics, and pharmacotherapeutics of all broad categories of agents.*

*Additional APRN core content specific to the role and population is integrated throughout the other role and population-focused didactic and clinical courses.*

*Separate courses in advanced physiology/pathophysiology, advanced health assessment, and advanced pharmacology are not required for students enrolled in post-master's DNP programs who hold current national certification as advanced practice nurses, unless the program has deemed this necessary.*

*Master's programs that have a direct care focus but are not APRN education programs (e.g., nursing education and Clinical Nurse Leader), incorporate graduate level content addressing the APRN core. They are not required to offer this content as three separate courses.*

#### **Program Response:**

The RN to BSN and MSN curricula are developed, implemented, and revised to reflect relevant professional nursing standards and guidelines. Each program is appropriately aligned to its applicable *Essentials*. Syllabi indicate these alignments and faculty review the syllabi with students during the first class session as a synchronous online session or as a recording; the later will be available during the site visit. As indicated on the CON SPE, review of courses, curricula maps, PLOs, and CLOs is conducted through the annual 360° Faculty Retreat.

#### **RN to BSN Program**

USU offers a 36 credit RN to BSN completion program through distance education technologies. It can be completed in one year and has 144 hours of clinical internship. The RN to BSN program curricula is congruent with the *Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008). The Program Learning Plan for the RN to BSN program is the detailed curriculum map that outlines in which course each PLO is either introduced (I), engaged (E), or applied (A) ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_UDV0LUhTbTl1X2s](https://drive.google.com/open?id=0B1qPvc-FYAL_UDV0LUhTbTl1X2s)). The following chart displays the alignment between the Baccalaureate Essentials, the RN to BSN PLOs, and course alignments.

	<b>AACN Baccalaureate Essentials</b>	<b>RN to BSN Program Learning Outcomes</b>	<b>Course Alignment</b>
1	Liberal Education for Baccalaureate Generalist Nursing Practice	1. Synthesize theoretical and empirical knowledge derived from the physical and behavioral sciences and humanities as a basis for professional nursing practice.	Essential 1 as aligned with PLO 1: NUR 371; NUR 372; NUR 377; NUR 490
2	Basic Organizational and Systems	6. Use current research findings, evidence based practices and	Essential 2 as aligned with PLO 6: NUR 370; NUR 372; NUR 377; NUR

	Leadership for Quality Care and Patient Safety	critical thinking skills in promoting the health and welfare of people. 9. Assume a leadership and advocacy role in promoting individual and global community health and wellness to improve healthcare outcomes.	378; NUR 379; NUR 490  Essential 2 as aligned with PLO 9: NUR 370; NUR 373; NUR 374; NUR 375; NUR 376; NUR 377; NUR 378; NUR 490
3	Scholarship for Evidence-based Practice	4. Integrate critical inquiry and evidence based thinking to effect excellence in client care outcomes. 6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.	Essential 3 as aligned with PLO 4: NUR 371; NUR 372; NUR 380; NUR 490  Essential 3 as aligned with PLO 6: NUR 370; NUR 372; NUR 377; NUR 378; NUR 379; NUR 490
4	Information Management and Application of Patient Care Technology	3. Adapt caring collaborative communication in interacting with patients, families, and the interdisciplinary healthcare team to improve healthcare outcomes. 8. Analyze the application of innovative patient care technology to improve patient care outcomes with the potential to reduce healthcare costs.	Essential 4 as aligned with PLO 3: NUR 373; NUR 374; NUR 375; NUR 376; NUR 378; NUR 379; NUR 380; NUR 490  Essential 4 as aligned with PLO 8: NUR 374; NUR 376; NUR 490
5	Healthcare Policy, Finance and Regulatory Environments	9. Assume a leadership and advocacy role in promoting individual and global community health and wellness to improve healthcare outcomes.	Essential 5 as aligned with PLO 9: NUR 370; NUR 373; NUR 374; NUR 375; NUR 376; NUR 377; NUR 378; NUR 490
6	Inter-professional Communication and Collaboration for Improving Patient Health Outcomes	3. Adapt caring collaborative communication in interacting with patients, families, and the interdisciplinary healthcare team to improve healthcare outcomes. 7. Collaborate with and advocate for consumers and colleagues in the delivery of healthcare services.	Essential 6 as aligned with PLO 3: NUR 373; NUR 374; NUR 375; NUR 376; NUR 378; NUR 379; NUR 380; NUR 490  Essential 6 as aligned with PLO 7: NUR 373; NUR 375; NUR 376; NUR 378; NUR 379; NUR 490
7	Clinical Prevention and Population Health	2. Apply nursing process to meet the health-promotion, and disease prevention need of global populations.  6. Use current research findings, evidence based practices and critical thinking skills in promoting the health and welfare of people.	Essential 7 as aligned with PLO 2: NUR 373; NUR 374; NUR 375; NUR 376; NUR 378; NUR 379; NUR 380 NUR 490  Essential 7 as aligned with PLO 6: NUR 370; NUR 372; NUR 377; NUR 378; NUR 379; NUR 490
8	Professionalism and Professional Values	5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.	Essential 8 as aligned with PLO 5: NUR 370; NUR 371; NUR 374; NUR 375; NUR 378; NUR 379; NUR 380; NUR 490
9	Baccalaureate	4. Integrate critical inquiry and	Essential 9 as aligned with PLO 4:

Generalist Practice	evidence based thinking to effect excellence in client care outcomes  5. Demonstrate professionalism in accepting accountability and responsibility for personal behavior and ethical practice.	NUR 371; NUR 372; NUR 380; NUR 490  Essential 9 as aligned with PLO 5: NUR 370; NUR 371; NUR 374; NUR 375; NUR 378; NUR 379; NUR 380; NUR 490
---------------------	---	---

### Master's Programs

USU offers three MSN tracks: A 38-credit MSN in Nursing Leadership for Health Systems Management Innovations (NL), a 40-credit MSN in Online Education and Educational Technology (OEET), and a 50-credit MSN Family Nurse Practitioner (FNP) degree. All three tracks are aligned with the *Essentials of Master's Education in Nursing* (AACN, 2011). The FNP program is additionally congruent with the Consensus Model for APRN Regulation, Licensure, Accreditation, Certification, and Education (July, 2008). The Program Learning Plans for the MSN-FNP, NL, and OEET programs are the detailed curriculum maps that outline in which course each MSN PLO is either introduced (I), engaged (E), or applied (A) ([https://drive.google.com/open?id=0B1qPvc-FYAL\\_VDU5RkFrTFF5Mmc](https://drive.google.com/open?id=0B1qPvc-FYAL_VDU5RkFrTFF5Mmc)). The following chart displays the alignment between the Master's Essentials, the NTF Criteria, MSN PLOs, and course alignments for each track.

	AACN Master's Essentials	NTF Criteria	MSN Program Learning Outcomes	Course Alignments		
				MSN-FNP	MSN-NL	MSN-OEET
1	Background for Practice from Science and Humanities	Scientific Foundations: Critically analyzes; Integrates scientific and humanities; Translates research; Develops new practice approaches.	5. Analyze socio-cultural, spiritual, ethical, economic, and political issues to improve healthcare outcomes and decrease healthcare costs.	Essential 1 as aligned with PLO 5: MSN 560 MSN 563 MSN 565 FNP 590 MSN 571 MSN 564 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600	Essential 1 as aligned with PLO 5: MSN 560 MSN 563 MSN 581 MSN 564 MSN 583 MSN 565 MSN 584 MSN 586 MSN 587 MSN 600	Essential 1 as aligned with PLO 5: MSN 560 MSN 563 MSN 565 MSN 583 MSN 585 MSN 571 MSN 564 MSN 578 MSN 600
2	Organizational and System Leadership	Leadership: Assumes advanced roles; Provides leadership and collaborates; Uses critical thinking; Advocates for access; Participates in professional organizations.	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and ensure continuity of patient care	Essential 2 as aligned with PLO 2: MSN 565 FNP 590 MSN 570 MSN 571 MSN 572 MSN 573 FNP 591 FNP 592 FNP 593	Essential 2 as aligned with PLO 2: MSN 581 MSN 582 MSN 583 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 2 as aligned with PLO 2: MSN 565 MSN 583 MSN 570 MSN 571 MSN 572 MSN 574 MSN 575 MSN 576 MSN 577

				FNP 594 FNP 595 FNP 596 FNP 597 MSN 600		MSN 578 MSN 600
3	Quality Improvement and Safety	Quality: Uses evidence to continue to improve; Evaluates relationships among cost, access, quality and safety; Evaluates organizational structure; Anticipates variations in practice	3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.	Essential 3 as aligned with PLO 3: MSN 561 MSN 563 MSN 565 FNP 590 MSN 572 MSN 573 MSN 600	Essential 3 as aligned with PLO 3: MSN 561 MSN563; MSN 580 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 3 as aligned with PLO 3: MSN 561 MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600
4	Translating and Integrating Scholarship into Practice	Practice Inquiry: Provides leadership; Generates knowledge from practice; Leads practice inquiry; Analyzes clinical guidelines.	6. Utilize the process of scientific inquiry to validate and refine knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment.	Essential 4 as aligned with PLO 6: MSN 561 MSN 563 MSN 570 MSN 571 MSN 572 MSN 573 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600	Essential 4 as aligned with PLO 6: MSN 561 MSN 563 MSN 580 MSN 581 MSN 582 MSN 583 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 4 as aligned with PLO 6: MSN 561 MSN 563 MSN 565 MSN 583 MSN 570 MSN 571 MSN 564 MSN 600
5	Informatics and Healthcare Technology	Technology and Information Literacy: Integrates appropriate technologies; Translates technical information; Demonstrates information literacy; Uses technology systems.	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.	Essential 5 as aligned with PLO 2: MSN 565 FNP 590 MSN570 MSN 571 MSN 572 MSN 573 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597	Essential 5 as aligned with PLO 2: MSN 581 MSN 582 MSN 583 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 5 as aligned with PLO 2: MSN 565 MSN 583 MSN 570 MSN 571 MSN 572 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600

				MSN 600		
6	Health Policy and Advocacy	Policy: Demonstrate understanding of policy and practice; Advocates for ethical policy; Contributes to development of health policy; Analyzes implications of health policy.	<p>4. Design and implement advocacy strategies that address healthcare policies and issues of social justice and equity in healthcare.</p> <p>7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.</p>	<p>Essential 6 as aligned with PLO 4: MSN 565 MSN 564 MSN 600</p> <p>Essential 6 as aligned with PLO 7: MSN 565 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600</p>	<p>Essential 6 as aligned with PLO 4: MSN 564 MSN 565 MSN 587 MSN 600</p> <p>Essential 6 as aligned with PLO 7: MSN 580 MSN 581 MSN 582 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600</p>	<p>Essential 6 as aligned with PLO 4: MSN 565 MSN 564 MSN 600</p> <p>Essential 6 as aligned with PLO 7: MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600</p>
7	Inter-professional Collaboration for Improving Patient and Population Health Outcomes	Health Delivery System: Applies knowledge of organizational practices; Minimizes risk to patients; Evaluates impact of healthcare delivery on patients; Collaborates in planning and transitions.	<p>1. Demonstrate the ability to effectively engage in collaborative intra and inter-disciplinary relationships in the conduct of advanced nursing practice.</p> <p>8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.</p>	<p>Essential 7 as aligned with PLO 1: MSN 560 MSN 561 MSN 570 MSN 571 MSN 572 MSN 573 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600</p> <p>Essential 7 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 570 MSN 571 MSN 572 MSN 564 MSN 573 FNP 591</p>	<p>Essential 7 as aligned with PLO 1: MSN 560 MSN 561 MSN 581 MSN 564 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600</p> <p>Essential 7 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 564 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600</p>	<p>Essential 7 as aligned with PLO 1: MSN 560 MSN 561 MSN 570 MSN 571 MSN 564 MSN 572 MSN 574 MSN 575 MSN 578 MSN 600</p> <p>Essential 7 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 570 MSN 571 MSN 572 MSN 564 MSN 574 MSN 575</p>

				FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600		MSN 576 MSN 577 MSN 578 MSN 600
8	Clinical Prevention and Population Health for Improving Health	Ethics: Integrates ethical principles in decision making. Evaluates ethical consequences; Applies ethical solutions.	3. Synthesize concepts and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.  7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.	Essential 8 as aligned with PLO 3: MSN 561 MSN 563 MSN 565 FNP 590 MSN 572 MSN 573 MSN 600  Essential 8 as aligned with PLO 7: MSN 565 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600	Essential 8 as aligned with PLO 3: MSN 581 MSN 563 MSN 580 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600  Essential 8 as aligned with PLO 7: MSN 580 MSN 581 MSN 582 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 8 as aligned with PLO 3: MSN 561 MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600  Essential 8 as aligned with PLO 7: MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 600
9	Master's Level Practice	Independent Practice: Demonstrates highest level of accountability; Practices independently; Diagnose and manage patient health needs.	2. Demonstrate leadership and effective management strategies for advanced nursing practice in a culture of caring, including proficiency in the use of information technology/technology resources to support practice and to ensure continuity for patient care.  3. Synthesize concepts	Essential 9 as aligned with PLO 2: MSN 565 FNP 590 MSN 570 MSN 571 MSN 572 MSN 573 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600  Essential 9	Essential 9 as aligned with PLO 2: MSN 581 MSN 582 MSN 583 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600  Essential 9	Essential 9 as aligned with PLO 2: MSN 565 MSN 583 MSN 570 MSN 571 MSN 572 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600  Essential 9

			and theories from nursing and related disciplines to develop and integrate new approaches for nursing practice of the whole/healthy human being.	as aligned with PLO 3: MSN 561 MSN 563 MSN 565 FNP 590 MSN 572 MSN 573 MSN 600	as aligned with PLO 3: MSN 581 MSN 563 MSN 580 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	as aligned with PLO 3: MSN 561 MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600
			7. Provide leadership in a dynamic healthcare environment with the knowledge to optimize healthcare outcomes and decrease costs within populations.	Essential 9 as aligned with PLO 7: MSN 565 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600	Essential 9 as aligned with PLO 7: MSN 580 MSN 581 MSN 582 MSN 565 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 9 as aligned with PLO 7: MSN 565 MSN 574 MSN 575 MSN 576 MSN 577 MSN 578 MSN 600
			8. Demonstrate expertise in a culture of caring and engage in critical dialogue with a vision for nursing practice in a selected environment.	Essential 9 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 570 MSN 571 MSN 572 MSN 564 MSN 573 FNP 591 FNP 592 FNP 593 FNP 594 FNP 595 FNP 596 FNP 597 MSN 600	Essential 9 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 564 MSN 584 MSN 585 MSN 586 MSN 587 MSN 600	Essential 9 as aligned with PLO 8: MSN 560 MSN 561 MSN 563 MSN 570 MSN 571 MSN 572 MSN 564 MSN 574 MSN 575 MSN 576 MSN 577 MSN 600

**III-C. The curriculum is logically structured to achieve expected student outcomes.**

- Baccalaureate curricula build upon a foundation of the arts, sciences, and humanities.
- Master’s curricula build on a foundation comparable to baccalaureate level nursing knowledge.
- DNP curricula build on a baccalaureate and/or master’s foundation, depending on the level of entry of the student.
- Post-graduate APRN certificate programs build on graduate level nursing competencies and knowledge base.

*Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as well as advanced course work.*

*Graduate curricula are clearly based on a foundation comparable to a baccalaureate degree in nursing. Graduate programs delineate how students who do not have a baccalaureate degree in nursing acquire the knowledge and competencies comparable to baccalaureate education in nursing as a foundation for advanced nursing education. Accelerated programs that move students from basic nursing preparation (e.g., associate degree or diploma education) to a graduate degree demonstrate how these students acquire baccalaureate level knowledge and competencies delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008), even if they do not award a baccalaureate degree in nursing in addition to the graduate degree.*

*DNP programs, whether post-baccalaureate or post-master's, demonstrate how students acquire doctoral-level competencies delineated in *The Essentials of Doctoral Education for Advanced Nursing Practice* (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.*

#### **Program Response:**

##### **RN to BSN Program:**

Courses in the RN to BSN curricula build upon knowledge from courses in the arts, sciences, and humanities from the students Associate Degree Nursing program. All faculty participate in the curriculum development and approval process (Appendix III-A.2: Curriculum Course Review Process). The details of the RN to BSN program, including its recommended curricular sequence with pre-requisites and required clinical hours, can be found here: <https://www.usuniversity.edu/degrees/bachelor-of-science-in-nursing-rn-to-bsn/?pID=85>

In the RN to BSN program, building of the students' knowledge and skills culminates in their capstone project, which is the last course in the program, *NUR 490: Capstone in Evidence-based Professional Nursing Practice*. The purpose of the Capstone project is to demonstrate the integration and synthesis of learning across the RN to BSN program. The last clinical hours are taken concurrently with the capstone to facilitate the project. The project reflects the student's ability to employ effective communication and collaboration skills, take on a leadership role, influence health care quality and safety, evaluate practice, and successfully affect change in health care. A sample BSN Capstone Project will be available for review during the site visit.

##### **MSN Programs:**

Admissions requirements for the MSN program include that students hold a BSN from a CCNE or Accreditation Commission for Education in Nursing (ACEN) accredited program and have an active, unencumbered RN license in the state where the student resides or from the state of California. MSN CLOs in each course guide the learning activities and build on knowledge and skills developed in previous MSN course work only. The MSN core is based on the *Essentials of Master's Education in Nursing* (AACN, 2011) and is taken by all MSN students at the beginning of their program. The MSN core includes: *Transitions in Practice: The Role of the Advanced Practice Nurse* (MSN 560), *Theoretical Foundations of Advanced Practice Nursing* (MSN 561), *Evidence-based Inquiry for Scholarship and Practice* (MSN 563), *Cultural and Spiritual Care across the Lifespan* (MSN 564), and *Nursing Leadership and Health Policy* (MSN 565). These courses serve as the foundation for all the MSN students before they branch out into their respective specialties. Additionally, the FNP students and the Education students then take the Advanced Practice Core, which includes: *Advanced Pathophysiology across the Lifespan* (MSN 570), *Advanced Pharmacology across the Lifespan* (MSN 571), *Advanced Physical Assessment across the Lifespan* (MSN 572), and *Advanced Physical Assessment across the Lifespan and Culture Lab* (MSN 573).

All master's students then enter their specialty and clinical courses. The details of these specialty courses and requisite clinical hours can be found as follows:

- MSN-FNP: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-family-nurse-practitioner/?pID=85>

- MSN-NL: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-nursing-leadership-for-health-systems-management-innovation/?pID=85>
- MSN-OEET: <https://www.usuniversity.edu/degrees/master-of-science-in-nursing-online-education-and-education-technology/?pID=85>

In all three tracks, building of the students' knowledge and skills culminates in their capstone project, which is the last course in the program, *MSN 600: Evidence-Based Capstone Project*. The purpose of the Capstone project is to demonstrate the integration and synthesis of learning across the MSN program. The last clinical hours are taken concurrently with the capstone to facilitate the project. The project reflects the student's ability to employ effective communication and collaboration skills, take on a leadership role, influence health care quality and safety, evaluate practice, and successfully affect change in health care. Sample MSN Capstone Projects will be available for review during the site visit.

The RN to BSN and MSN curricula are logically constructed to achieve expected student learning outcomes. The courses, program learning plans (curriculum maps), PLOs, and CLOs are reviewed as part of a continuous improvement process identified in the CON SPE and reviewed at the 360° Faculty Retreat. Each program has a master syllabus that is reviewed by the CON Instructional Designer and the faculty subject matter expert. The Curriculum Committee approves any revisions to the master syllabi templates.

#### **III-D. Teaching-learning practices and environments support the achievement of expected student outcomes.**

*Elaboration: Teaching-learning practices and environments (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student outcomes identified in course, unit, and/or level objectives.*

##### **Program Response:**

Faculty use a variety of teaching-learning environments to assist with student achievement of course and program outcomes across all programs. A variety of curricular and instructional design methods are used to engage students in the achievement of expected student outcomes, e.g. blogs, PowerPoint presentations, reflective journaling, essays, etc. The RN to BSN and MSN programs are delivered utilizing an online format. MSN-FNP students are expected to participate in planned face to face immersion experiences. Library Services are an integral part of providing orientation to our online students during the face-to-face immersion week at the beginning of their program.

Online courses for the RN to BSN and MSN programs are delivered in both synchronous and asynchronous formats utilizing voice and video conferencing: Adobe Connect in D2L or Blackboard Collaborate. Students and faculty receive both initial training in use of Adobe Connect as well as have access to ongoing support services. Students and faculty also use this online conferencing for virtual student support. Online students can set up their own session to meet with other students for the completion of group assignments. This system also allows for the recording of synchronous classes, so that students can go back and review the material prior to exams. Just-in-time training on component parts of the curriculum occurs throughout the program of study. For example, in the class prior to the start of clinical hours, the clinical coordinator and the director of evaluations and Project Concert review the associated software and reminders for clinical.

##### **Skills and Simulation Lab:**

Standard II-B describes the new skills lab at USU. A computer and large screen are designated for on-ground in-lab lecturing and demonstration. With the size of the room, the faculty often holds the didactic portion of class in this setting with direct access to demonstration for skills and techniques. The equipment is adequate for FNP groups of up to 16 students with two faculty available for supervision.

##### **Direct Faculty Support:**

Faculty stay in weekly contact with students and students having issues are identified as early as possible so they can be remediated and continue on schedule in class. Students with personal difficulties that cannot be resolved are contacted regularly and a plan for return is made using the petition process when they start their

leave. If a student is not successful in a class, remediation is provided and students are given the opportunity to retake the course the next time it is offered or when they are ready to return.

#### Project Concert<sup>®</sup>:

Project Concert<sup>®</sup> is the CON's online, secured data management system. It houses the final templates of all CON's documents such as course syllabi, handbooks, forms, program learning plans, and education plans. It allows students to log all their clinical hours, patient cases, and pull summary reports of their progress (reports can be done per clinical course or program progress). It allows students and faculty to complete their course evaluations securely. It allows students to keep their university documents in one location. Student forms, education plans, and contact information are stored in their Information Tab. Project Concert<sup>®</sup> allows students to access all program related clinical forms, handbooks, and student forms. It allows faculty and adjunct faculty to keep their university documents in one location. Faculty are able to store their licenses (reminders are emailed when expiration approaches), running list of all courses taught, committee and council activities, scholarly activities, demographic information, and document storage to name a few. Finally, it allows CON staff to pull regular reports in various formats for the 360<sup>o</sup> evaluation process established by CON.

#### Online Classroom:

As noted, explained, and visually presented in Standard II-D, the CON is now using the D2L learning management platform for cohorts starting as of July 2017. For students, D2L provides a unique learning environment. The CON continues to use a variety of course contents to enrich the student experience, including periodic synchronous live sessions, streaming videos, websites, mobile applications, virtual patients and cases, and threaded discussions, all research-based best practices for teaching and learning. It provides an opportunity for faculty to teach the way they want, enhancing their academic freedom with prescribed curriculum. Training on the resources and the technology is provided at the Virtual Orientation conducted by the Academic Advisor and the online synchronous Student Orientation Immersion conducted by the CON. For those who will graduate in 2017, the cohorts are remaining in Blackboard.

#### III-E. The curriculum includes planned clinical practice experiences that:

- enable students to integrate new knowledge and demonstrate attainment of program outcomes; and
- are evaluated by faculty.

*Elaboration: To prepare students for a practice profession, each track in each degree program and post-graduate APRN certificate program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Clinical practice experiences are provided for students in all programs, including those with distance education offerings. Clinical practice experiences involve activities that are designed to ensure students are competent to enter nursing practice at the level indicated by the degree/certificate program. The design, implementation, and evaluation of clinical practice experiences are aligned to student and program outcomes.*

#### Program Response:

The RN to BSN and MSN programs have a process for the implementation of planned clinical practice experiences to integrate new knowledge and demonstrate attainment of program outcomes and are evaluated by faculty (Appendix III-E.1: Clinical Practice Workflow).

#### RN to BSN Program

The required clinical hours for the RN to BSN program are currently found in two courses: NUR 379 (96 hours) and NUR 380 (48 hours). Each student is asked to find a mentor that meets University standards; an Affiliation Agreement is then signed by all parties (Appendix III-E.2: Affiliation Agreement Template). The state of California requires that BSN students include 96 hours of clinical to meet the Public Health Certificate requirements. The RN to BSN Education Plan outlines these requirements (Appendix III-E.3: Student RN to BSN Education Plan Template).

- NUR 379: Global Community Service Project Internship (96 clinical hours)
  - This course provides students the opportunity to apply theoretical knowledge gained in their RN-BSN coursework and apply it in a variety of settings at the local, national or global level. Service projects may include but are not limited to developing a plan for impacting health

- issues, evaluating and participating in community health initiatives at the local, national, or global health settings. Students will participate in 96 hours of clinical practice during this course. This course taken concurrently with NUR 378 Global Health and Community Based Nursing is designed to meet the required criteria for Public Health Nursing. Students are expected to track their clinical internship hours in Project Concert. Entries must be completed by end of day on Sunday of the week the experience occurred. Entries completed after this time will not be accepted and the student will be required to repeat the unaccepted hours.
- NUR 380: Professional Nursing Leadership (48 internship hours)
    - This course introduces students to the fundamentals of leadership and management in nursing and the healthcare environment. Cultural issues, including values, beliefs and practices that affect individuals, groups and communities are discussed. Emphasis is placed on understanding the healthcare system and social forces affecting care delivery, effective leadership, patient outcomes, project management, accounting principles, and entrepreneurship. The course also focuses on professional engagement and development. Healthcare policies and their effects on professional practice are explored. This course includes 48 hours of a Leadership Internship.

### MSN Programs

The MSN programs include planned clinical experiences that enable students to integrate new knowledge and demonstrate attainment of PLOs, Master’s Essentials, and NTF Criteria. In courses where clinical hours are required of students, these experiences are evaluated by clinical faculty in Project Concert®. They do this by approving and commenting as needed on every students’ clinical encounter. Following is a hypothetical example of that approval and feedback:

Logged in as: STUDENT Student, Student

Experience → Existing

Experience ID: 59733

Experience Start Date and Time: 7/8/2017 09:00

End Date and Time: 7/8/2017 09:30

Supervisor: McLeod, Renee

Comment: Did you have an opportunity to do any specific patient education with this patient since you mentioned that you did this? Did you

Comment: prescribe any medications, even Tylenol? Are you sure you did this exam at the independent level? Please respond back to me with changes if needed. Thank you.

General	Procedures	Diagnosis	ICD
Encounter	Episodic Visit (Ex: one time problem or physical)		
Age group	Peds (1-12)		
Clinical Practicum	Acute Care illness - 144 hours		
Specialty (if applicable)	Pediatrics - 80 hours		
Race	Hispanic		
Gender	Male		
What role did you play?	<input type="radio"/> Observed - viewed entire encounter of the provider with patient <input type="radio"/> Assisted with supervision - participated in a full encounter with the oversight of the provider <input checked="" type="radio"/> Independent - conducted the full encounter and updated the provider		
Management Di/tx/Education	Manage diagnosis Prescribed medication Patient Education		
Type of Practice	Pediatrics		
Preceptor	Dr. Rodriguez		

Save & Edit Save & New

The Clinical Placement Coordinator additionally works with NL and OEET students as they seek clinical sites appropriate to course requirements, assisting in finding the placement or supporting the student when they self-place. If required, an Affiliation Agreement is then signed by all parties.

### MSN - Nursing Leadership for Health Systems Management and Innovation Program of Study

- MSN 587: Residency in Nursing Leadership and Systems Management (96 clinical hours)
  - Define a clinical leadership problem, objective, or initiative to address
  - Research best practices to address the problem
  - Plan for the implementation of the solution

- Participate in planning implementation meetings during the residency
- Complete the capstone project as an executive summary presentation

#### MSN - Online Education and Education Technology Program of Study

- MSN 575: Online Teaching and Learning Strategies in Nursing (48 hours teaching practicum)
  - Examine teaching and learning theories applied to an online or blended program
  - Discuss teaching and learning challenges with online and distance learning courses
  - Identify classroom instructional strategies and learning activities to engage the online learner
  - Investigate the use of various learning platforms used for online and distance learning
  - Choose a variety of online instructional technologies to engage students
  - Evaluate emerging online and e-learning instructional technologies to use in online learning activities.
- MSN 578: Specialist Clinical Practicum for Nurse Educators (144 specialist clinical hours)
  - Provide specialty clinical experiences based on advanced practice nursing theory and evidence based practice with attention to resource allocations, acceptability, simplicity, adherence, efficacy, spirituality, and safety.
  - Practice the advanced professional roles of clinician, consultant, collaborator, community advocate, educator and leader in the care of client healthcare problems and needs.
  - Implement the nursing process and critical thinking to manage client healthcare problems using evidence based rationale and appropriate community resources across the lifespan.
  - Evaluate appropriateness of non-pharmacologic and pharmacologic interventions for healthcare problems considering such variables as cost effectiveness, risk factors, psychosocial environmental factors, health literacy, spirituality, and cultural competence to achieve maximum level of health.

In June 2017, a subcommittee of the Curriculum Committee met to review both of the above programs' curriculum regarding the semester credit hours and the clinical requirements. The subcommittee's recommendations were presented to a combined CON Curriculum Committee and Faculty Meeting on July 10, 2017 (Appendix III-E.4: 7/2017 Curriculum/Faculty Meeting Minutes). The decision was made to continue requiring 96 hours for the NL program in MSN 587 and to split the OEET hours between a teaching practicum in MSN 575 (48 hours) and specialist clinical hours in MSN 578 (48 hours). Should the OEET 40-credit program be decreased to 38 credits (currently under discussion to align it with the 38-credit NL program), these curricular changes would be implemented at that time.

#### MSN - Family Nurse Practitioner Program of Study

The MSN program affords students the opportunity to develop professional competencies in practice settings aligned to the educational preparation. Each student is placed in clinical sites appropriate to course requirements; an Affiliation Agreement (Appendix III-E.2: Affiliation Agreement Template) is then signed by all parties. Clinical practice training is provided for students through four mandatory face-to-face immersion experiences where faculty can provide direct instruction on skills and evaluate clinical competence formatively and summatively, as outlined on a student's Education Plan (Appendix III-E.5: Student FNP Education Plan Template). Additional clinical practice experiences are conducted in the student's domiciled location and are designed to ensure students are competent to enter nursing practice at the level indicated by the degree program. This is clarified in the course information below.

- MSN 573: Advanced Physical Assessment across the Lifespan and Culture Lab (48 hours includes 12 lab, 36 clinical)
  - By the end of this course, students will have had 12 hours of skills practice in the clinical practice lab with standardized patients. Skills include the ability to conduct a head to toe physical assessment using appropriate equipment with an emphasis on identifying abnormal findings. They have the opportunity to practice female pelvic exams and male prostate and testicular exams.
  - Students complete 36 hours of precepted Clinical Hours with a Primary Care Provider during weeks 6, 7, and 8. The focus of these clinical hours is practice of exam techniques.
  - Students maintain a log of these clinical hours in Project Concert. At the end of the experience, students complete a self-reflection assignment within the course.
- FNP 592: Common Illnesses across the Lifespan-Clinical Practicum (16 lab hours, 144 clinical hours)

- By the end of this course, students will have had 16 hours of skills practice in the clinical practice lab. Here they learn skills such as casting, suturing, toenail extractions, and x-ray. Patient exams are conducted in the skills lab on standardized patients prior to their precepted clinical experience.
- Students have 144 hours of precepted clinical practice time with a Primary Care Provider over the 8-week course. The focus of these hours is with patients experiencing common illnesses across the lifespan.
- Students maintain a log of these clinical hours in Project Concert. At the end of the experience, students complete a self-reflection assignment within the course.
- FNP 594: Primary Health of Acute Illness across the Lifespan-Clinical Practicum (16 lab hours, 144 clinical hours)
  - By the end of this course, students will have had 16 hours of skills practice in the clinical practice lab. Patient exams are conducted in the skills lab on standardized patients.
  - Students have 144 hours of precepted clinical practice time with a Primary Care Provider over the 8-week course. The focus of these hours is with patients experiencing acute illnesses across the lifespan.
  - Students maintain a log of these clinical hours in Project Concert. At the end of the experience, students complete a self-reflection assignment within the course.
- FNP 596: Primary Health of Chronic Illness across the Lifespan - Clinical Practicum (16 lab hours, 144 clinical hours)
  - By the end of this course, students will have had 16 hours of skills practice in the clinical practice lab. Patient exams are conducted in the skills lab on standardized patients.
  - Students have 144 hours of precepted clinical practice time with a Primary Care Provider over the 8-week course. The focus of these hours is with patients experiencing chronic illnesses across the lifespan.
  - Students maintain a log of these clinical hours in Project Concert. At the end of the experience, students complete a self-reflection assignment within the course.
- FNP 597: Clinical Residency and Practice Management (144 clinical hours)
  - Students have 144 hours of precepted clinical practice time with a Primary Care Provider over the 8-week course. The focus of these hours is the remediation of any evident skill and experience gaps in the required specialty populations. Additionally, students have the opportunity to focus on a specialty area such cardiology or dermatology if all remediation has been accomplished.
  - Students maintain a log of these clinical hours in Project Concert. At the end of the experience, students complete a self-reflection assignment within the course.

In courses where clinical hours are done by students, those experiences are evaluated by clinical faculty in Project Concert<sup>o</sup>. They do this by approving and commenting as needed on every students' clinical encounter. The Clinical Performance Observation Tool is a longitudinal evaluation used to assess FNP students' progress through their clinical courses and to provide immediate feedback on achievement of clinical goals and skills or to identify areas where students are missing opportunities to practice skill sets or need supplementary education (Appendix III-E.6: Sample Student Redacted Clinical Performance Observation Tool). This allows the faculty to schedule additional hands-on training as needed for the cohort or schedule a one-on-one session to assist a particular student. Assessment data is gathered four times during the FNP clinical courses; this data is reviewed by the FNP Program Director and the clinical faculty member teaching the course. The tool is completed by the Clinical Preceptor and the student uploads it into his or her Project Concert document library. It should be noted that the electronic version was discontinued in 2016 because it was determined to be too cumbersome for faculty to maintain in a manner that would be useful for student success. However, faculty considered it so valuable that they continued to use the tool manually by having preceptors complete it directly until a new form could be agreed upon at the upcoming 2017 360<sup>o</sup> Faculty Retreat.

### **III-F. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

*Elaboration: The curriculum and teaching-learning practices (e.g., use of distance technology, didactic activities, and simulation) are appropriate to the student population (e.g., adult learners, second*

language students, students in a post-graduate APRN certificate program) and consider the needs of the program-identified community of interest.

**Program Response:**

The curriculum and teaching-learning practices of the RN to BSN and MSN programs consider the needs and expectations of the CON’s identified communities of interest which include students, faculty, alumni, employers, nurses, the Board of Trustees, and CON’s Nursing Advisory Board (Appendix III-F.1: Advisory Board Member List). Program outcomes are reviewed annually with key communities and changes are made based on feedback as appropriate. For example, at the July 2015 Advisory Board meeting, members recommended that trans-cultural health care should be embedded into programs (Appendix III-F.2: 7/2015 Advisory Board Meeting Minutes). As a result, the caring science language was added to the CON mission and the CON confirmed that this was embedded across the curriculum at both degree levels.

The USU mission is to serve underserved and diverse students, which the CON supports. For example, data as of March 3, 2017 indicates that the FNP (and post-grad FNP certificate) student body is 66% minority students with only 8% white students and 20% not specifying their race/ethnicity. All CON students are working adults; up to 90% are socially, economically, or educationally disadvantaged; and English is a second language for most of them.

Program	Count	Percent
Master of Science in Nursing	46	78%
Post Graduate Family Nurse Practitioner	13	22%
<b>Grand Total</b>	<b>59</b>	<b>100%</b>

Race/Ethnicity	Count	Percent
Asian	17	29%
Black or African American	2	3%
Hispanic	19	32%
Native Hawaiian or Other Pacific Islander	1	2%
White	5	8%
Two or more races	3	5%
Not Specified/Unknown	12	20%
<b>Grand Total</b>	<b>59</b>	<b>100%</b>

**Weaver Reading and Kurzweil Text to Speech Literacy Software:**

While the CON could not specifically address either that students are working adults or are disadvantaged socially or economically, it could address that they are mostly ELL students and provide support for achievement of PLOs regarding it. In summer of 2015, all MSN students were tested for reading comprehension and vocabulary assessment using Weaver Reading. CON discovered that 50% of its students had a 4th grade reading comprehension level and a 4th or 5th grade vocabulary level. Curricular revisions were made to incorporate Weaver Reading assignments into core courses to improve student success with both reading and vocabulary levels. In 2016, the CON reviewed capstone writing projects and concluded improvement had occurred. Assessment and data review concluded that 50% of students had improved to a 14th grade reading comprehension level and 50% improved to an 8th grade or higher reading comprehension level, which was reflected in the improved writing in the capstones (Appendix III-F.3: 2015 Redacted Weaver Testing Report<sup>4</sup>). The CON also implemented use of Kurzweil Text to Speech software, aimed to assist students whose second

<sup>4</sup> In reading the 2015 Weaver Testing Report, note that a student’s first score is the baseline determined when they initially tested in Summer 2015. The progression seen in each results from students completing Weaver Reading testing after completing core course assignments embedded within the curriculum.

language is English. Both Weaver Reading and the Kurzweil software are loaded onto iPad Mini's with a detailed orientation on their use.

Weaver Reading activities are incorporated into core courses to improve both reading and vocabulary levels of MSN students after it was determined in 2015 that their reading comprehension was at a 5th grade level and vocabulary use was at a 4th to 5th grade level. Additional teaching-learning strategies also include iPad mini's with software and translation programs provided for every student along with a detailed orientation on their use. Faculty stay in weekly contact with students and students having issues are identified as early as possible so they can be remediated and continue on schedule in class.

The CON implemented these student support tools with the entering FNP cohort in Fall 2015. The need for this additional support was based on the student retention rates and the feedback received from a focus group of FNP alumni that affirmed the need for these added supports. This invaluable feedback addressed the various barriers they faced as students and identified resources they wished had been available for them during their program (Appendix III-F.4: Minutes/Transcripts of Focus Group). The CON has put together a package of student support services unique to the CON with the aim to increase our student sustainability, retention, and completion of the program on time. Currently, five FNP cohorts have received these tools. The software, specifically Weaver Reading and Kurzweil Text to Speech, have helped students improve their reading comprehension and writing skills. The software systems can generate reports to track improvement, which were reviewed at the 360° Faculty Retreat (Appendix I-B.1: 8/2016 Faculty Retreat Minutes).

Following is an example of a result from that 2016 360° Faculty Retreat. Feedback from student evaluations indicated a high stress level about prepping for clinical. The CON responded by stressing early on in the program the need for preparation and found new times within the curriculum to remind students about what was coming. This led to inviting the Clinical Placement Coordinator and Director of Evaluation and Contracts into the course to discuss clinical requirements and demonstrate Project Concert®.

<p>MSN 571 Advanced Pharmacology Across the Lifespan</p>	<p><u>FEEDBACK TO CON:</u> Taught twice. This is a challenging course, a big transition from their role as RN to NP level in which they attend to all the information and make decisions on it. Comments made focus on the quizzes that they don't come from the textbook. This is intentional because they have to apply the content of what they learned to a set of facts, rather than look for the answer in the book. First group, was given more comprehensive exams, but they were overwhelmed. Made a change in the number of exams, which was put through and approved by curriculum committee. It is being offered again in Fall 1. Suggestion on bringing in cultural information. Decreased number of case studies, from 3 a week to 2. Students felt having less, but spending more time with it would help them improve. The second group did well. This group did not want to cut</p>	<p>Starting with this group, we need to start STRESSING that when they move from year 1 to year 2, it is very challenging to do so working full time. We need to find new times to remind them.  Coordinate with culture.</p>
--	--	---



	<p>down on work hours, and this is the first time we really see this. Response time to student's emails: if it was a question about the course, the response as an announcement to the whole group in the BB. Faculty is now responding to both the individual student and the group. We want to be clear that we respond to both, so students see we answer within the response time. Some comments said students said they would find answer based online materials or books: but faculty would accept if proof was given.</p>	
--	--	--

A second example concerned results after review of the Immersion Evaluation. The CON reviewed all immersion evaluations and a theme that emerged was related to remote interaction between faculty and student. The CON talked to the Information Technology department and the Chief Financial Officer to improve the technology with the classrooms, which led to the installation of Smart Technology, including an upgrade in Wi-Fi capabilities to support live streaming.

[An Immersion](#) evaluation was implemented Spring 1, 2015 following the CON's inaugural immersion session. Based on the feedback from students about this initial immersion the faculty are implementing a virtual orientation immersion that will be sent to all students two weeks before they come to campus for the face-to-face or streaming (for online students) immersion.  
AUG 31\*

Detail information discussed regarding the evaluation:  This Fall 2016 immersion was one of our better immersion, especially for the first one we have had in the new building.  All the students were excited and felt it was well organized. Some comments on being overwhelmed but that is normal.  Immersion from students including the virtual sessions with George and Cynthia was well received. The students heard them well and students took notes on their presentation.
Room for improvements:  Better interaction between remote faculty and students. Liz sent an email to IT and CFO about having the podiums hooked up correctly so that we can have a camera and mic so the speaker can see and hear the students.
Action Plan:  Keep evaluation in place for another year. To be reviewed again next year.  May look into reordering the schedule to have BBP and HIPPA earlier in the day.
Additional Notes:

**III-G. Individual student performance is evaluated by the faculty and reflects achievement of expected student outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.**

*Elaboration: Evaluation of student performance is consistent with expected student outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. Processes exist by which the evaluation of individual student performance is communicated to students. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students in all programs. Faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.*

**Program Response:**

In the MSN and RN to BSN programs, evaluation of student performance is conducted by faculty and is reflective of expected student outcomes. These outcomes include maintaining satisfactory performance and progression toward completion of the BSN or MSN program of study. Criteria for grading of student performance are published and found in course syllabi and in the USU catalog; they are consistently applied by faculty. University policies appear as links in each online course. Following is the Nursing Grading Scale as published in the USU Catalog:

Grade	Quality Points	Percentage Grades	Indicator
A	4.00	95-100	Superior
A-	3.75	90-94	
B+	3.35	87-89	Above Average (MSN Requirement)
B	3.00	84-86	
B-	2.75	80-83	
C+	2.35	77-79	
C	2.00	74-76	(BSN Requirement)
F	0.00	≤ 73	

Clear guidelines for successful course completion are outlined in each applicable course syllabus. Faculty and preceptors evaluate student progress by determining if the student has met the objectives of the course. For example, to meet the clinical requirement, the student logs his or her hours through Project Concert. Data resulting from analysis of those hours is disaggregated into Individual Clinical Hour reports that indicate the total number of clinical hours and time with patients (Appendix III-G.1: Redacted Individual Clinical Hours Report); a Clinical Summary report that includes data points such as patient gender and ethnicity, types of

supervision (observed, supervised, independent), types of clinical setting, and clinical specialty hours (Appendix III-G.2: Redacted Clinical Summary Report); and a Procedures and ICD Code Required Minimum Experiences Report that includes data points such as types of experiences required for certification and student progress towards each (red, yellow, green) (Appendix III-G.3: Redacted Procedures and ICD Code Required Minimum Experiences Report). Both students and faculty can track progress in the program through these reports. The Clinical Summary Report has been used by graduates as part of a portfolio in a job hiring process.

Faculty use rubrics (Appendix III-G.4: Discussion Board Rubric; Appendix III-G.5: Signature Paper Rubric; Appendix III-G.6: Reflection Journal Rubric) to evaluate individual student performance on assignments, such as discussion boards, reflective journals, papers, final exams, and presentations. These rubrics are embedded in the LMS and set clear expectations for students and faculty when submitting and grading academic work.

#### Signature Assignments with Associated Scoring Rubrics

In the didactic courses, there are signature assignments identified in an appendix of every syllabus. They can be either papers, projects, or presentations with associated rubrics. They are aligned to specific PLOs and are used to evaluate individual and course-level student performance. Following is an example of the signature assignment for FNP 593 and its scoring rubric. Appendix III-G.7: Rubric Statistics Report is an example of the course-level report that can be pulled from the learning management system that provides faculty with a snapshot of student learning for that assignment.

#### **Signature Assignment: Current EBP – Acute Health Problem**

##### **Summary**

##### **Guidelines:**

Select a client from clinical experience with an acute health problem or complaint requiring at least two visits. Submit a complete H & P from the initial visit with this client and a focused SOAP note for the follow-up visit. Based on this client's condition, conduct a literature search for two research articles that discuss various approaches to the treatment of this condition. Peer reviewed articles must address the standardized procedure or guidelines for this diagnosis. Incorporate the research findings into the decision-making for this client's treatment. In the paper, compare and contrast or address how treatment or the plan may have been different based on the research findings. The discussion on relating research to practice should be 3-4 pages and the total paper should be no longer than 10 pages including references. The research articles must be an **original research contributions** (no review articles or meta-analysis) and must have been published within the last five years. Cover the criteria listed below. The paper should be APA formatted and **no longer than 10 pages**.

- Reviews topic and explains rationale for its selection in the context of client care. (2 pts)
- Evaluates key concepts related to the topic. (2 pts)
- Describes multiple viewpoints if this is a controversial issue or one for which there are no clear guidelines. (2 pts)
- Assesses the merit of evidence found on this topic i.e. soundness of research (5pts)
- Evaluates current EBM guidelines, if available. Or, recommends what these guidelines should be based on available research. Discuss the Standardized Procedure for this diagnosis. (5 pts)
- Discusses how the evidence did impact/would impact practice. What should be done differently based on the knowledge gained? (3 pts)
- Consider cultural, spiritual, and socioeconomic issues as applicable. (2pts).
- Utilizes APA guidelines, cite references (2 pts)
- Writing style at the graduate level (2pts)

**Grading Rubric:**

Criteria	Superior	Above Average	Competent MSN Requirement	Below Standard	Far Below Standard
	95-100	87-94	84-86	73-83	<72
<b>Content</b>	Fully responds to all questions in journal prompt and answers each completely.	Answers all questions without fully developing answers for each	Answers all questions without fully developing answers for each	Answers some of the questions but does not fully develop answers	Off topic or not responsive to prompt.
<b>Accuracy</b>	Entries contain accurate information and properly cited references	Entries contain accurate information but references are cited improperly.	Entries contain accurate information and properly cited references	Entries do not contain any references.	Entries are speculative and unsupported.
<b>Integration Of Knowledge</b>	Demonstrates that the author fully understands and has applied concepts learned in the course at a superior level. Concepts are integrated into the writer's own insights. The writer provides concluding remarks that show analysis and synthesis of ideas.	Demonstrates that the author understands and has applied concepts learned in the course. Conclusions are supported in the body of the reflection.	Demonstrates that the author, for the most part, understands and has applied concepts learned in the course. Some of the conclusions, however, are not supported in the body of the reflection.	Demonstrates that the author, to a certain extent, understands and has applied concepts learned in the course.	Does not demonstrate that the author has fully understood and applied concepts learned in the course.
<b>Writing Style, Formatting and Conventions</b>	Numerous references are used to support opinions and justify recommendations. Excellent writing with no grammar, APA or spelling errors	Appropriate references that support opinions and recommendations. Above average writing with no grammar, APA or spelling errors.	Appropriate references that support opinions and recommendations. Sufficient writing with minimal grammar, APA or spelling errors.	Minimal references and support for opinion on policy and recommendations for changes. Insufficient writing with minimal APA/Grammar and/or spelling errors.	Opinions and recommendations not well supported. Unacceptable writing with poor APA/Grammar and /or spelling

With an improved understanding of standard higher education assessment practice, at its July 2017 Faculty Meeting (Appendix III-E.4: 7/2017 Curriculum/Faculty Meeting Minutes), the faculty determined that each RN to BSN and MSN PLO would have a mastery achievement target: *80% of students will receive an 80 or above on the signature assignment in the courses aligned with a particular PLO.* The following charts indicate the PLO alignments with course signature assignments. These assignments are aggregated to provide PLO achievement data as shown by the FNP PLO achievement data in IV-E.

**RN to BSN**

It should be noted that the last cohort to teach out of the old RN to BSN curriculum completed in Summer 2016. No students have enrolled in the program since that time. In that curriculum, the use of signature assignments did not exist. However, in the new RN to BSN curriculum approved by CCNE effective with the accreditation in 2015, signature assignments are integrated within the courses. The chart below indicates PLO alignments with signature assignments in the new curriculum. The first cohort of 5 students to use the new curriculum began July 3, 2017 as a result of the support provided through the pending change in ownership.

Signature Assignment Title	Course	Week
<b>PLO 1</b>		
Personal Theoretical Framework for Practice Nursing	NUR 371	8
Develop Skill Set for Retrieving and Reviewing the Literature	NUR 372	6
Cultural/Spiritual Practice that Affects Healthcare Experience	NUR 377	7
Capstone Project	NUR 490	8
<b>PLO 2</b>		
Cultural/Spiritual Practice that Affects Healthcare Experience	NUR 377	7
Research, Summarize Data & Statistics Community Health Topic	NUR 378	8
Research, Summarize Data & Statistics of Social Determinants of Health	NUR 379	7
Capstone Project	NUR 490	8
<b>PLO 3</b>		
Registered Nurse in Policy Advocacy Paper	NUR 373	7

AHRQ Case Study Presentation Video	NUR 374	7
Quality Improvement Project (Group Project) with focus on Collaboration	NUR 375	8
Clinical System Analysis	NUR 376	7
Cultural/Spiritual Practice that Affects Healthcare Experience	NUR 377	7
Research, Summarize Data & Statistics Community Health Topic.	NUR 378	8
Research, Summarize Data & Statistics of Social Determinants of Health	NUR 379	7
Professional Engagement and Development	NUR 380	8
Capstone Project	NUR 490	8
<b>PLO 4</b>		
Personal Theoretical Framework for Practice Nursing	NUR 371	8
Develop Skill Set for Retrieving and Reviewing the Literature	NUR 372	6
Professional Engagement and Development	NUR 380	8
Capstone Project	NUR 490	8
<b>PLO 5</b>		
Portfolio	NUR 370	8
Personal Theoretical Framework for Practice Nursing	NUR 371	8
AHRQ Case Study Presentation Video	NUR 374	7
Quality Improvement Project (Group Project) with focus on Collaboration	NUR 375	8
Research, Summarize Data & Statistics Community Health Topic.	NUR 378	8
Research, Summarize Data & Statistics of Social Determinants of Health	NUR 379	7
Professional Engagement and Development	NUR 380	8
Capstone Project	NUR 490	8
<b>PLO 6</b>		
Portfolio	NUR 370	8
Develop Skill Set for Retrieving and Reviewing the Literature	NUR 372	6
Cultural/Spiritual Practice that Affects Healthcare Experience	NUR 377	7
Research, Summarize Data & Statistics Community Health Topic.	NUR 378	8
Research, Summarize Data & Statistics of Social Determinants of Health	NUR 379	7
Capstone Project	NUR 490	8
<b>PLO 7</b>		
Registered Nurse in Policy Advocacy Paper	NUR 373	7
Quality Improvement Project (Group Project) with focus on Collaboration	NUR 375	8
Clinical System Analysis	NUR 376	7
Research, Summarize Data & Statistics Community Health Topic.	NUR 378	8
Research, Summarize Data & Statistics of Social Determinants of Health	NUR 379	7
Professional Engagement and Development	NUR 380	8
Capstone Project	NUR 490	8
<b>PLO 8</b>		
AHRQ Case Study Presentation Video	NUR 374	7
Clinical System Analysis	NUR 376	7
Capstone Project	NUR 490	8
<b>PLO 9</b>		
Portfolio	NUR 370	8
Registered Nurse in Policy Advocacy Paper	NUR 373	7
Quality Improvement Project (Group Project) with focus on Collaboration	NUR 375	8
Clinical System Analysis	NUR 376	7
Cultural/Spiritual Practice that Affects Healthcare Experience	NUR 377	7
Research, Summarize Data & Statistics Community Health Topic.	NUR 378	8
Professional Engagement and Development	NUR 380	8
Capstone Project	NUR 490	8

In the new MSN-FNP curriculum approved by CCNE effective with the accreditation in 2014, signature assignments are integrated within the courses. The chart below indicates PLO alignments with signature assignments in the new FNP curriculum. The target *80% of students will receive an 80 or above* was then applied to signature assignment data from the calendar year 2016 for the MSN programs (see results in IV-E).

Signature Assignment Title	Course	Week
<b>PLO 1</b>		
Group Wiki Paper: APN Frequently Asked Questions (FAQ)	MSN 560	6
Personal Theoretical Framework for Advanced Practice Nursing	MSN 561	8
Cultural/Spiritual Practice that Affects Health Care Experience	MSN 564	8
Case Presentations	MSN 570	8
Case Study Write Up Log	MSN 571	8
Final Exam	MSN 572	8
Observed Clinical Exam	MSN 573	8
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 2</b>		
Group Presentation/Prezi	MSN 565	7
Case Presentations	MSN 570	8
Case Study Write Up Log	MSN 571	8
Final Exam	MSN 572	8
Observed Clinical Exam	MSN 573	8
Case Study and Plan of Care	FNP 590	8
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 3</b>		
Personal Theoretical Framework for Advanced Practice Nursing	MSN 561	8
Initial Steps for an Evidence-Based Project Template	MSN 563	7
Group Presentation/Prezi	MSN 565	7
Final Exam	MSN 572	8
Observed Clinical Exam	MSN 573	8
Case Study and Plan of Care	FNP 590	8
Capstone Project	MSN 600	8
<b>PLO 4</b>		
Cultural/Spiritual Practice that Affects Health Care Experience	MSN 564	8
Group Presentation/Prezi	MSN 565	7
Capstone Project	MSN 600	8
<b>PLO 5</b>		
Group Wiki Paper: APN Frequently Asked Questions (FAQ)	MSN 560	6
Initial Steps for an Evidence-Based Project Template	MSN 563	7
Cultural/Spiritual Practice that Affects Health Care Experience	MSN 564	8
Group Presentation/Prezi	MSN 565	7

Case Presentations	MSN 570	8
Case Study Write Up Log	MSN 571	8
Case Study and Plan of Care	FNP 590	8
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 6</b>		
Personal Theoretical Framework for Advanced Practice Nursing	MSN 561	8
Initial Steps for an Evidence-Based Project Template	MSN 563	7
Case Presentations	MSN 570	8
Case Study Write Up Log	MSN 571	8
Final Exam	MSN 572	8
Observed Clinical Exam	MSN 573	8
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 7</b>		
Group Presentation/Prezi	MSN 565	7
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 8</b>		
Group Wiki Paper: APN Frequently Asked Questions (FAQ)	MSN 560	6
Personal Theoretical Framework for Advanced Practice Nursing	MSN 561	8
Initial Steps for an Evidence-Based Project Template	MSN 563	7
Cultural/Spiritual Practice that Affects Health Care Experience	MSN 564	8
Case Presentations	MSN 570	8
Case Study Write Up Log	MSN 571	8
Final Exam	MSN 572	8
Observed Clinical Exam	MSN 573	8
Evaluation of Clinical Practice Guideline	FNP 591	8
Clinical	FNP 592	1 to 8
Current EBP - Acute Health Problem	FNP 593	7
Clinical	FNP 594	1 to 8
Comprehensive Case Study - Chronic Health Problem	FNP 595	7
Clinical	FNP 596	1 to 8
Creating a Professional Portfolio & Job Video	FNP 597	7
Capstone Project	MSN 600	8
<b>PLO 9</b>		

**III-H. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.**

*Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of student outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.*

**Program Response:**

USU and the CON are committed to academic quality and student success. Data is regularly reviewed through reports generated in Project Concert at both the course level and the program level. At the course level, results inform changes in course content, course delivery and teaching methods for continuous program improvement.

The Curriculum Committee meets monthly and is currently led by the Associate Dean for Faculty and Research and is attended by the core faculty, available adjunct faculty, the Dean, and other invited guests as appropriate. This Committee reviews and revises syllabi, implements new learning methods brought forth by faculty, and oversees other vital curriculum needs. Results are used to make informed decisions regarding the design and delivery of curriculum and improvement in the educational effectiveness of CON programs, courses, and teaching-learning methodologies.

For example, the Student End Of Course Evaluation results are distributed to the Dean, Associate Deans, and to the core Faculty Director. The Dean reviews the evaluation results to monitor instructor performance and addresses any area of concern with individual instructors. The data is provided to the Curriculum Committee who review at the end of each term (Spring 1 & 2, Summer 1 & 2, and Fall 1 & 2) and then the Faculty Forum, which reviews the data three times a year (Spring 2, Summer2, and Fall 2).

Based on the feedback from students about the immersion experience over the last 1.5 years, the faculty requested implementation of a virtual orientation immersion conducted by an Academic Advisor that covers an orientation to the university and the learning management platform, D2L. With the pending change of ownership and student need for synchronous virtual connections, the CON Immersion experience has been adjusted. A recording of a 2017 Immersion using the new format will be available at the site visit.

At the Faculty Forum, a discussion of and reflection on courses recently taught, provides an opportunity for instructors to: (a) share perceived strengths and weaknesses of a course; (b) exchange ideas on how to improve assignments, course delivery and course content, and (c) share strengths and weaknesses of the students.

Another example from the August 2016 360° Faculty Retreat shows that combined data from student and faculty course evaluations from MSN 600 (taught 7 times in 2016) resulted in a curricular change to MSN 600 (Appendix III-H.1: Track Changed Syllabus for MSN 600). The following screenshot indicates these faculty discussions and changes.

ASSESSMENT COURSE		
<p style="text-align: center;">MSN 600 Evidence-Based Capstone Project</p>	<p>7 times Continuation of EBP, this is 2 units. It still has quite a few things for students to do. They appreciate separating their projects, like their posters and Prezi presentations. This course is very involved, you need to be sure the student is completing the project in 8 weeks. Quite a bit of time to work directly with students and responding to many questions.</p> <p>This course we looked at for University Outcomes and communication. With oral communication we were looking if there was a clear message that was organized and content with examples. This is a perfect course to show that we are meeting University and CON outcomes as it relates to written communication at the masters level. We had a 92% inter-rater reliability between George and Merlie: the rating was high.</p> <p>Any time we had 2 faculty teaching a course, having the same communication is vital. When Carolyn was working with Merlie, it was wonderful to have the same answers given to students, even if it was with a student issue.</p>	<p>We will look at the books, as it is tied to the Evidence class.</p> <p>Students will only be doing an electronic poster. It is a PowerPoint presentation.</p> <p>Maybe do a video of presenting their projects.</p> <p>Start sending out invitations to others to attend the presentations, select a few to play in the board room.</p> <p>Continue open and consistent communication and messaging to students.</p>

### Standard III Summary

#### Areas of Accomplishment

- Integrated program curricula that clearly reflect relevant nursing standards and guidelines.
- Effective processes for evaluating program learning outcomes.
- Attention to special learning needs of diverse student population.

#### Areas for Continued Focus

- Continued attention to implementation of innovative strategies for student learning.
  - Action Plan: Collect and analyze new technologies for learning, e.g. use of the National Electronic Health Record.
- Continued attention to curriculum and teaching-learning practices to foster ongoing improvement.
  - Action Plan: The Dean will develop the use of Google Docs to track and monitor curriculum changes as they occur.
  - Action Plan: CON will continue to participate in institutional program review processes.

## Standard IV

### Program Effectiveness: Assessment and Achievement of Program Outcomes

The program is effective in fulfilling its mission and goals as evidenced by achieving expected program outcomes. Program outcomes include student outcomes, faculty outcomes, and other outcomes identified by the program. Data on program effectiveness are used to foster ongoing program improvement.

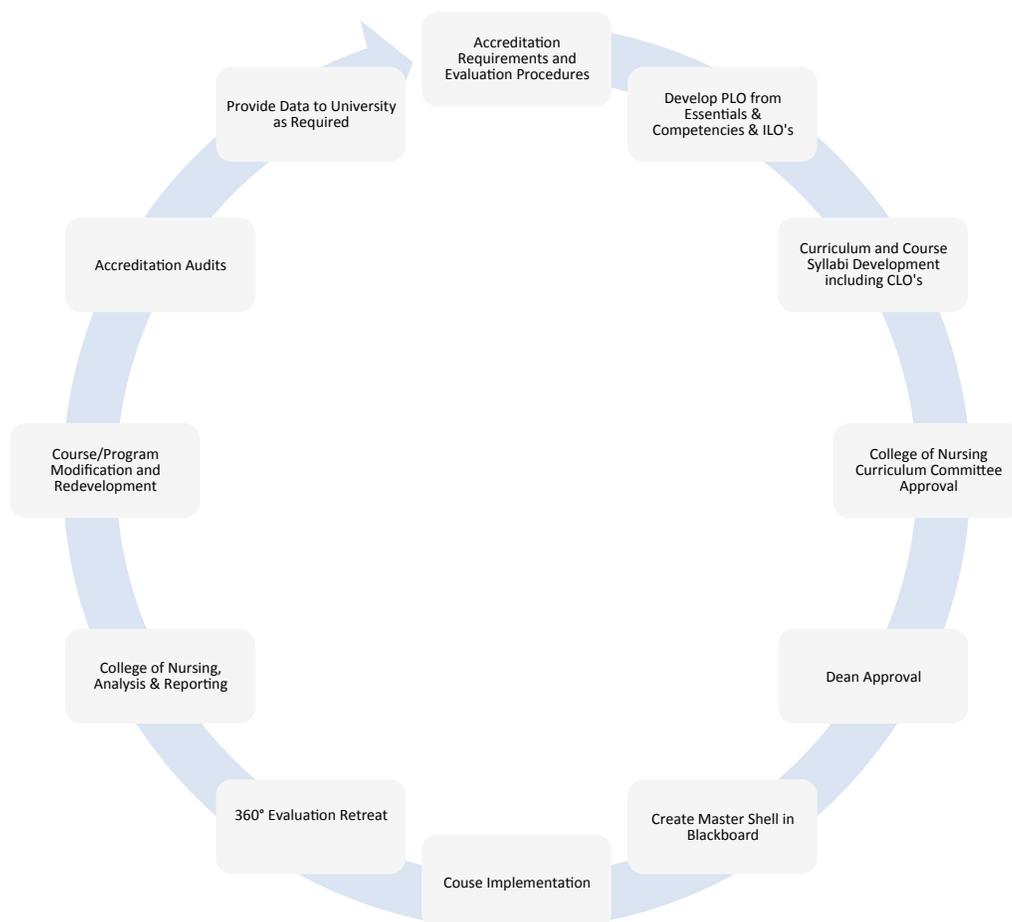
#### IV-A. A systematic process is used to determine program effectiveness.

*Elaboration: The program uses a systematic process to obtain relevant data to determine program effectiveness. The process:*

- is written, ongoing, and exists to determine achievement of program outcomes;
- is comprehensive (i.e., includes completion, licensure, certification, and employment rates, as required by the U.S. Department of Education; and other program outcomes);
- identifies which quantitative and/or qualitative data are collected to assess achievement of the program outcomes;
- includes timelines for collection, review of expected and actual outcomes, and analysis; and
- is periodically reviewed and revised as appropriate.

#### Program Response:

The following graphic depicts the CON's process for program effectiveness, assessment and achievement of program outcomes. Program evaluation for the CON is an iterative and cyclical process of data collection throughout the academic year (Fall I through Summer II), followed by data analysis, an annual report, and faculty discussion of the report and program revision.



The SPE is based on the CCNE standards and guides the comprehensive evaluation of program effectiveness and achievement of program outcomes by identifying appropriate measures, tools, and expected standards of performance. The CON defines program effectiveness measures as a "360° Evaluation" and conducts a 360° Faculty Retreat around it annually. The CON has held its 360° Faculty Retreat annually since 2015. The purpose of the Retreat is data analysis of the program effectiveness measures as described below; a review of program quality, institutional commitment and resources, and curriculum and instructional practices; and any necessary revision to the SPE itself. These meetings are recorded (available for review during the site visit) and minutes are taken to note where improvements are needed, the appropriate action plan, and implementation strategies. The most recent 360° Faculty Retreat was held in August 2016 (Appendix I-B.1: 8/2016 Faculty Retreat Minutes). During that meeting, the CON faculty and administration conducted data analysis and necessary reviews of data sources described below as evidenced in the minutes. The SPE itself was confirmed as appropriate moving forward.

In July 2014, the CON hired a part-time Director of Evaluation and Project Concert® (now titled Director of Evaluation and Contracts effective August 2016) who, together with the CON Dean and core faculty, implemented various evaluations and created a schedule for release. In Fall I, 2014, the first piloted evaluations were administered through the secured online platform, Project Concert®, to determine the effectiveness of the CON's program and to obtain input from faculty, adjunct faculty, students, and clinical preceptors. With the successful pilot, Project Concert® has continued as the platform through which evaluations are administered.

The CON uses its SPE to govern the process for determining program effectiveness. The SPE identifies the data that will be used for this purpose and the relative review timeline. The CON administers a variety of direct and indirect program effectiveness evaluations through Project Concert® that include annual reports for student end-of-course evaluations, faculty end-of-course evaluations, preceptor evaluations, clinical site evaluations, alumni/employer evaluations, program exit evaluations, immersion evaluations, and longitudinal evaluations (currently discontinued). In Fall 2017, the CON will have three complete years of aggregate data.

Further information on each type follows:

- **Student end-of-course evaluations** have been administered from Project Concert during each term since Fall 1 2014 (Appendix IV-A.1: SEOCE Template). Reminders for completion are sent automatically to the student's e-mail weekly until the student submits the evaluation. This methodology has assisted in raising the response rate. The evaluation is opened two weeks before the end of a term and remains open two weeks after, for a total of four weeks. An annual aggregate report is compiled that summarizes the results for each course that has been taught over the previous 12 months, which is then discussed at the annual 360° Faculty Retreat (Appendix IV-A.2: Sample 2016 FNP Aggregate Student Course Evaluation Report).
- **Faculty end-of-course evaluations** include [a] since 2014, an instructor course evaluation electronically delivered via Project Concert starting two weeks before the end of term and continuing two weeks after, and [b] verbal reporting at the Faculty Forum meeting conducted via a synchronous online meeting (Appendix IV-A.3: FEOCE Template). An annual aggregate report is compiled that summarizes the results for each course that has been taught over the previous 12 months, which is then discussed at the annual 360° Faculty Retreat (Appendix IV-A.4: Sample 2016 FNP Aggregate Faculty Course Evaluation Report).
- **Faculty Evaluation of Clinical Preceptor; Faculty Evaluation of Clinical Site; Student Evaluation of Preceptor and Clinical Site; and Preceptor Feedback of Student Clinical Competencies** are separate evaluations used in the MSN FNP program. CON uses these evaluation reports to provide immediate feedback where it might be necessary to the preceptor, the clinical site, or the student (Appendix IV-A.5: Sample Redacted Faculty Evaluation of Clinical Preceptor Term Report; Appendix IV-A.6: Sample Redacted Faculty Evaluation of Clinical Site Term Report; Appendix IV-A.7: Sample Redacted Student Evaluation of Preceptor and Clinical Site Term Report; Appendix IV-A.8: Sample Redacted Preceptor Feedback of Student Clinical Competencies Term Report). As the CON has not admitted new students into the cohorts for the MSN Nursing Leadership/Health Systems Management Innovations (NL), and the

MSN Online Education and Education Technology (OEET) programs, the clinical tracking system built in Project Concert<sup>®</sup> has only applied to the FNP students. However, with the anticipated increase in enrollment spurred by the pending change in ownership, the infrastructure is built and available for use by the other programs.

- **Alumni and Employer evaluation** consists of survey data collected from alumni and employers regarding graduate preparedness for their professional role in the workplace. The first of these evaluations occurred in July 2015. The evaluation was open for an eight-week period to accommodate the hectic schedule of CON alumni; however, rates were too low to render the results useful. In 2016, the University began to complete the Alumni and Employer on behalf of all of its colleges (Appendix IV-A.9: 2016 University Alumni/Employer Report). The first college level alumni/employer survey occurred in 2015, but produced a low response rate and so its data was considered unreliable (Appendix IV-A.10: CON 2015 Alumni/Employer Survey Report). The CON scheduled its 2016-17 academic year administration of its college level alumni/employer survey for August 1, 2017 (Appendix IV-A.11: CON Alumni/Employer Survey Template). Since it is open for 8 weeks, only partial data will be available at the site visit.
- A **Program Exit evaluation** was implemented in Spring II 2015. The electronic form is designed to branch with specific questions for the RN to BSN and MSN students (Appendix IV-A.12: RN to BSN Program Exit Evaluation Template; Appendix IV-A.13: FNP Program Exit Evaluation Template). It inquires about the student's debt, employment opportunities, identified areas of positive impact of our program and areas of improvement, and questions of Learning Outcomes as established by the Accreditation Commission for Education in Nursing Standard 6.1. This evaluation is conducted annually as students graduate from our various programs and remains open for a four-week period to allow recent graduates ample time to respond. (Appendix IV-A.14: 2016 RN to BSN/FNP Aggregate Program Exit Report)
- An **Immersion evaluation** was implemented in 2015 following the CON's inaugural face-to-face immersion session for each new term. CON immersions occur at the beginning of their first session and the schedule is adjusted to allow students to ask questions, receive additional training, and spend more time with the Director of their program so that questions about courses, clinical, and progression through the program can be discussed. The Immersion Evaluation is scheduled the day after an immersion is held and remains open for a three-week period. (Appendix IV-A.15: 2016 Aggregate Immersion Evaluation Report).
- **University Program Learning Outcome Assessment:** This is a direct measure of student achievement of the PLO. CON participated in the University Assessment Task Force during 2014-2015 and 2015-2016 Appendix IV-A.16: 2015-16 Annual Report on Program Learning Outcomes Assessment; the 2016-2017 process is ongoing. This process includes samples of student work, which are then scored currently using a University rubric. Future cycles will include faculty-developed PLO rubrics.

Data collected through Project Concert<sup>®</sup> is generated into reports that include statistics on the disaggregated response rate, calculation of individual and group responses, and any comments submitted by students and faculty in their own respective evaluations. In Project Concert<sup>®</sup>, data may be disaggregated and analyzed by source, i.e., a single term, teaching, or curriculum, or may be aggregated to evaluate the program overall. At the program level, these data become part of the portfolio of continuing evaluation data that inform changes to programs, e.g. course sequencing, learning outcomes, and expected student outcomes. All data components of the 360<sup>o</sup> evaluation are considered in making recommendations for modification and redevelopment of curriculum.

University assessment practices include a program review process outlined in the Program Review Manual 2017-02 found at <https://www.usuniversity.edu/wp-content/uploads/2017/06/Program-Review-Manual-2017-02.pdf>. The foundational principle of the program review is to provide faculty with the opportunity, time, and resources for thoughtful reflection and conversation about the quality and currency of their programs with the goal of continual improvement. It provides a structure to foster continual program improvement that is aligned with departmental, college, and institutional goals. It is designed to assess the academic quality and fiscal

sustainability of each offered program. Elements of the program review include an introduction, an analysis of evidence about program academic quality and program viability, a summary reflection, and information on future goals and planning for improvement. The CON participates in institutional program review. See the schedule as follows, taken from appendix A in the Program Review Manual 2017-02:

USU Program Review Five-Year Cycle							
Academic Degree Programs			Year of Program Review				
College	Program Name	Most Recent Review	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
CON	RN to BSN	2015-16					x
CON	MSN-FNP	2014-15				x	
CON	MSN Specializations (Not FNP)	2014-15				x	

At the time of the “Most Recent Review” identified above, USU accepted the submission of a self-study to an accrediting agency (in this case, CCNE) as sufficient substitute for the institutional program review. Effective with the Program Review process revised in 2017, USU modified that policy to include the addition of a supplemental report if the disciplinary/specialized accreditation self-study does not adequately address all of the elements of the institutional program review. Both the specialized self-study and any supplemental report are to be submitted to the institutional Program Review Committee as part of the institutional program improvement planning process.

#### IV-B. Program completion rates demonstrate program effectiveness.

*Elaboration: The program demonstrates achievement of required program outcomes regarding completion. For each degree program (baccalaureate, master’s, and DNP) and post-graduate APRN certificate program:*

- *The completion rate for each of the three most recent calendar years is provided.*
- *The program specifies the entry point and defines the time period to completion.*
- *The program describes the formula it uses to calculate the completion rate.*
- *The completion rate for the most recent calendar year is 70% or higher. However, if the completion rate for the most recent calendar year is less than 70%, (1) the completion rate is 70% or higher when the annual completion rates for the three most recent calendar years are averaged or (2) the completion rate is 70% or higher when excluding students who have identified factors such as family obligations, relocation, financial barriers, and decisions to change major or to transfer to another institution of higher education.*

*A program with a completion rate less than 70% for the most recent calendar year provides a written explanation/analysis with documentation for the variance.*

*This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.*

#### Program Response:

The CON demonstrates achievement of required program outcomes regarding completion. Below are completion rates for each of the most recent 3 years. The charts specify the entry point and define time to completion. The formula used to calculate completion rates is provided. The charts below indicate completion rates for the RN to BSN and MSN programs.

At USU, the Academic Catalog (p. 40) identifies the in-time completion rate by indicating that students are expected to complete their program within a defined maximum program completion time, which may not exceed 150% of the normal time frame. USU measures program length based on semester credit units; therefore, a student is not allowed to attempt more than 150% of the number of semester credit units in his/her degree program of study. For example, the RN to BSN completion program is 36 credits, students should not exceed attempting 54 credits to complete the program. All courses attempted and given a letter grade are included as credits attempted and successfully completed in assessing student progress against the maximum allowable time frame.

### RN to BSN Program

Full-time online RN to BSN students can complete the 36-credit program within 12 months by taking 2 courses every 8 weeks. However, it is more typical due to leaves of absence resulting from family obligations, relocation, and financial barriers for students to take at least 2 years to complete the 36-credit program. It should be noted that in order to graduate with their BSN, students need to have transferred in or taken at USU credits to meet the total of 120 credits for graduation.

The program completion rates for the last three years for the RN to BSN are as follows:

Term/Year of Graduation	Term/Year of Admission*	# Students Admitted	# Students Graduated	% Students Graduated**
2016	2013 to 2014	10	7	100%
2015	2013 to 2014	12	5	100%
2014	2011 to 2013	20	7	100%

\*Admissions occurred through multi terms throughout these date ranges. The difference between the number of students admitted and those who graduated in a given year is accounted for by students who withdrew voluntarily or who were administratively withdrawn.

\*\*Based on the USU completion policy described above.

### MSN Programs

Similar to the explanation provided in the RN to BSN section above, the three MSN programs calculate as follows:

- Since the FNP program is 50 credits, students should not exceed attempting 75 credits to complete the program. Full-time FNP students can complete the program within 24 months by taking 2 courses every 8 weeks and completing their 612 clinical hours.
- Since the NL program is 38 credits, students should not exceed attempting 57 credits to complete the program. Full-time NL students can complete the program within 24 months by taking 2 courses every 8 weeks and completing their 96 residency hours.
- Since the OEET program is 40 credits, students should not exceed attempting 60 credits to complete the program. Full-time OEET students can complete the program within 24 months by taking 2 courses every 8 weeks and completing their 144 precepted hours.

However, it is more typical due to leaves of absence resulting from family obligations, relocation, and financial barriers for students to take at least 3 years to complete the program.

The program completion rates for the last three years for the MSN are as follows:

Term/Year of Graduation	Term/Year of Admission*	# Students Admitted	# Students Graduated	% Students Graduated**
2016	2013 to 2016***	49	34	100%
2015	2012 to 2015***	48	30	100%
2014	2011 to 2013	35	26	100%

\*Admissions occurred through multi terms throughout these date ranges. The difference between the number of students admitted and those who graduated in a given year is accounted for by students who withdrew voluntarily or who were administratively withdrawn.

\*\*Based on the USU completion policy described above.

\*\*\*The university has a policy that requires students to withdraw and restart if they are out of attendance for longer than 180 days on a leave of absence. In 2015 and 2016, there were 1 and 2 students respectively who fit into this category, hence starting and graduating in the same year.

USU makes every attempt to ensure student success in both the RN to BSN and MSN programs. If and when students approach the maximum allowable credit units, they are approached and a remediation plan is put in place to help them complete on time. All CON students who completed their respective nursing programs meet the USU completion calculation, indicating an overall completion rate of 100%.

#### IV-C. Licensure and certification pass rates demonstrate program effectiveness.

*Elaboration: The pre-licensure program demonstrates achievement of required program outcomes regarding licensure.*

- *The NCLEX-RN® pass rate for each campus/site and track is provided for each of the three most recent calendar years.*
- *The NCLEX-RN® pass rate for each campus/site and track is 80% or higher for first-time takers for the most recent calendar year. However, if the NCLEX-RN® pass rate for any campus/site and track is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that campus/site or track is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that campus/site or track is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

*A campus/site or track with an NCLEX-RN® pass rate of less than 80% for first-time takers for the most recent calendar year provides a written explanation/analysis with documentation for the variance and a plan to meet the 80% NCLEX-RN® pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, data relative to specific campuses/sites or tracks, and data on repeat takers.*

*The graduate program demonstrates achievement of required program outcomes regarding certification. Certification results are obtained and reported in the aggregate for those graduates taking each examination, even when national certification is not required to practice in a particular state.*

- *Data are provided regarding the number of graduates and the number of graduates taking each certification examination.*
- *The certification pass rate for each examination for which the program prepares graduates is provided for each of the three most recent calendar years.*
- *The certification pass rate for each examination is 80% or higher for first-time takers for the most recent calendar year. However, if the pass rate for any certification examination is less than 80% for first-time takers for the most recent calendar year, (1) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) for the most recent calendar year, (2) the pass rate for that certification examination is 80% or higher for first-time takers when the annual pass rates for the three most recent calendar years are averaged, or (3) the pass rate for that certification examination is 80% or higher for all takers (first-time and repeat) when the annual pass rates for the three most recent calendar years are averaged.*

*A program with a pass rate of less than 80% for any certification examination for the most recent calendar year provides a written explanation/analysis for the variance and a plan to meet the 80% certification pass rate for first-time takers. The explanation may include trend data, information about numbers of test takers, and data on repeat takers.*

*This key element is not applicable to a new degree or certificate program that does not yet have individuals who have taken licensure or certification examinations.*

### Program Response:

The MSN-FNP program is the only program that leads to national certification and it was accredited by CCNE in 2014. Students have the option of sitting for their certification boards either from the American Nurses Credentialing Center (ANCC) or American Academy of Nurse Practitioners Certification Board (AANPCB). The first time CON students were permitted to sit for their boards occurred in 2016 after CCNE accreditation in 2014. That said, it should be noted that in CA, APRN students who have graduated from a BRN-approved program are not required to have national certification to practice. Because the program is BRN-approved, the 46 students who graduated in 2016 were not required to sit for national certification.

However, in exam year 2016, 29 students chose to sit for the AANPCB boards and 18 passed on the first attempt, indicating a 62% pass rate. In exam year 2016, 2 students chose to sit for the ANCC boards and 2 passed on the first attempt, indicating a 100% pass rate. In the aggregate, 31 sat and 20 passed on the first attempt, indicating a total pass rate of 64.5%. It should be noted that 100% of FNP students taking the national certification exams passed on the second attempt.

Year	ANCC Attempted	ANCC Passed	Pass rate	AANPCB Attempted	AANPCB Passed	Pass Rate	
2016	2	2	100%	29	18	62%	
Total							64.5%

There are several reasons why the CON's license/certification pass rate for 2016 graduates does not exceed the required 80% for the most recent calendar year.

- Prior to CCNE accreditation in 2014, the CON ran a program that was unaccredited. Upon the Dean's arrival in 2014, a pathway to certification was sought for those who took this unaccredited curriculum. AANPCB permitted these students to take their boards in 2016 because the transcribed curriculum appeared similar to that of an accredited program (Appendix IV-C.1: CON Correspondence with AANPCB). It is possible that some of the 29 students who sat in 2016 were educated with the unaccredited curriculum and therefore were not adequately prepared for the exam.
- It is possible that some of the total of 33 students who sat for boards had graduated 3-5 years prior to sitting for their boards, which may have influenced their ability to be successful.
- It is possible that because the majority of the CON's graduates are individuals for whom English is a second language, their ability to master the language in a national certification exam may have been hampered.

When it became evident that CON's pass rate would not meet the required 80%, the CON instituted a plan to meet the pass rate.

- First, the CON became CCNE accredited with a complete program revision to bring it into compliance with CCNE standards.
- Second, the CON instituted Weaver Reading and Kurzweil Educational Systems Text-to-Speech software to assist those ELL students in improving their reading and comprehension skill levels.
- Third, the CON embedded a national certification predictor test in the last immersion to identify gaps in knowledge and then remediate students prior to graduation as needed. Additionally, in the last course of the program, students are provided with information on national certification review courses, costs, and review course location/dates.
- Fourth, students take a second predictor exam just before sitting for their boards and are advised not to take their national boards until they can pass with a minimum of 80%.

With these measures, the CON expects that future graduates who choose to sit for a national certification board will contribute to a CON aggregate pass rate above 80%.

### IV-D. Employment rates demonstrate program effectiveness.

*Elaboration: The program demonstrates achievement of required outcomes regarding employment rates.*

- *The employment rate is collected separately for each degree program (baccalaureate, master's, and DNP) and post-graduate APRN certificate program.*
- *Data are collected within 12 months of program completion. For example, employment data may be collected at the time of program completion or at any time within 12 months of program completion.*
- *The employment rate is 70% or higher. However, if the employment rate is less than 70%, the employment rate is 70% or higher when excluding graduates who have elected not to be employed.*

*Any program with an employment rate less than 70% provides a written explanation/analysis with documentation for the variance.*

*This key element is not applicable to a new degree or certificate program that does not yet have individuals who have completed the program.*

**Program Response:**

In the RN to BSN and MSN programs, the CON can demonstrate that 100% of the graduates who were able to be contacted are employed. The CON has consistently sought to gather this data within the required 12 months of completion, but has not always been successful. In 2015, the CON administered its own alumni/employer survey with a response rate of 8%. In 2016, the CON participated with the university's alumni/employer survey and enjoyed a 36% response rate. However, as a result of the poor response rate to the particular question requesting employer information, the CON instituted a procedure to gather that data. At the current time, a USU staff person personally calls every graduate within 12 months of graduation and asks a series of questions that provide the CON with the ability to collect complete employment information. Appendix IV-D.1: Redacted Alumni Database shows every CON student, date of graduation, and, for those who were able to be contacted, their current employer.

**IV-E. Program outcomes demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of outcomes other than those related to completion rates (Key Element IV-B), licensure and certification pass rates (Key Element IV-C), and employment rates (Key Element IV-D); and those related to faculty (Key Element IV-F).*

*Program outcomes are defined by the program and incorporate expected levels of achievement. Program outcomes are appropriate and relevant to the degree and certificate programs offered and may include (but are not limited to) student learning outcomes; student and alumni achievement; and student, alumni, and employer satisfaction data.*

*Analysis of the data demonstrates that, in the aggregate, the program is achieving its outcomes. Any program with outcomes lower than expected provides a written explanation/analysis for the variance.*

**Program Response:**

**University Assessment of Student Learning:**

The CON participates with the University Assessment Task Force to directly assess student achievement of program learning outcomes for its MSN-FNP program through evaluation of student work using an institutional rubric with an expected performance of 80% of students achieving the designated score on each criterion on that rubric. Each program completes an Annual Program Learning Outcome Assessment Report that includes the assessment benchmarks, methods, measures, results, discussion, and improvement planning for that year's PLO(s). Going forward, the institutional rubrics will be replaced with program-faculty-created PLO rubrics to strengthen the feedback to programs. The RN-BSN and the MSN-NL and MSN-OETT programs will also be evaluated using this process in the 2017-2018 academic year.

Aggregate university-level data from 2014-2016 indicates that CON students are successfully achieved 15 of the 17 criteria related to institutional learning outcomes. Note that the initial assessments for MSN-FNP used student work from I (Introduced) and E (Engaged) level courses, as defined by the program learning plans. Future assessments will always include at least one A (Applied) level course to measure achievement at the end of the program.

**Quantitative Reasoning (2014-15): MSN Quantitative Reasoning Assessment Data (n=13) for an E level course.**

Rubric Criteria and Scores:

Criterion	0		1		2		3		Met? (80% at "2" or higher)
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	
Interpreting Data	0	0%	1	7%	4	31%	8	62%	Yes
Numerical Analysis	0	0%	0	0%	2	15%	11	85%	Yes
Numerical Problem Solving	0	0%	0	0%	7	54%	6	46%	Yes
Translating Information	0	0%	0	0%	5	38%	8	62%	Yes

**Information Literacy (2014-15): MSN Information Literacy Assessment Data (n=15) for an I level course**

Rubric Criteria and Scores:

Criterion	0		1		2		3		Met? (80% at "1" or higher)
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	
Select Information	0	0%	10	67%	4	27%	1	6%	Yes
Communicate Information	0	0%	12	80%	3	20%	0	0%	Yes
Cite Information	4	27%	5	33%	6	40%	0	0%	No*

\*To address the "not met" item, the CON created assignments in MSN 560 and MSN 563 to support APA formatting.

**Written Communication (2015-16): Written Communication Assessment Data (n=10) for A-Level Course**

Rubric Criteria and Scores:

Criterion	0		1		2		3		Met? (20% at "2" AND 80% at "3")
	Count	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	
Central Message	0	0%	0	0%	0	0%	20	100%	Yes
Organization	0	0%	0	0%	4	20%	16	80%	Yes
Supporting Content	0	0%	0	0%	4	20%	16	80%	Yes
Delivery	0	0%	0	0%	4	20%	16	80%	Yes
Context & Genre	0	0%	0	0%	6	30%	14	70%	No*

\*After discussion with the Assessment Task Force, the "Context & Genre" criterion was deemed too ambiguous to provide useful data. However, see the chart in IV-H for how this was addressed in the CON.

**Oral Communication (2015-16): Evidence #1 Oral Communication Assessment Data (n=10) for E-Level Course**

Rubric Criteria and Scores:

Criterion	0		1		2		3		Met? (80% at "2" or higher)
Central Message	0	0%	0	0%	0	0%	20	100%	Yes
Organization	0	0%	0	0%	0	0%	20	100%	Yes
Supporting Content	0	0%	0	0%	0	0%	20	100%	Yes
Delivery	0	0%	0	0%	0	0%	20	100%	Yes
Vocabulary	0	0%	0	0%	0	0%	20	100%	Yes

**Program Signature Assignments and Student Learning:**

In addition to the work with the University's Assessment Task Force, the CON tracks aggregate data on student performance on signature assignments for its RN to BSN and MSN programs. Each course in these programs includes a signature assignment aligned to at least one program learning outcome. The CON faculty set a learning achievement target of *80% of students would receive an 80 or better* on the associated grading rubric.

The CON applied this data analysis process to 2016 signature assignment data. The goal was to determine student achievement levels aligned with PLO in both the RN to BSN and 3 tracks of the MSN program. However, there were no students in the CCNE-approved RN to BSN curriculum with signature assignments in 2016. The first cohort of 5 students to use the new curriculum began July 3, 2017. There were no students in the CCNE-approved MSN curricula for the NL and OEET programs in 2016. With the pending change in ownership and increased marketing for these programs, the CON anticipates admitting more students in these programs. Annual Signature Assignment achievement data will be available for the RN to BSN and the MSN-NL and MSN-OEET programs after the 2017-2018 academic year and would be evaluated at the August 2018 360° Faculty Retreat.

The following chart indicates the aggregate 2016 student achievement levels for the MSN-FNP PLOs, based on the PLO chart in III-G.

PLO	Mastery Achievement Target	N	Actual %	Target Met? Y/N
1	80% of students will receive an 80 or above on signature assignments aligned to this PLO	368	98%	Y
2	80% of students will receive an 80 or above on signature assignments aligned to this PLO	304	99%	Y
3	80% of students will receive an 80 or above on signature assignments aligned to this PLO	219	97%	Y
4	80% of students will receive an 80 or above on signature assignments aligned to this PLO	102	98%	Y
5	80% of students will receive an 80 or above on signature assignments aligned to this PLO	357	97%	Y
6	80% of students will receive an 80 or above on signature assignments aligned to this PLO	319	98%	Y
7	80% of students will receive an 80 or above on signature assignments aligned to this PLO	183	100%	Y
8	80% of students will receive an 80 or above on signature assignments aligned to this PLO	387	97%	Y

9	80% of students will receive an 80 or above on signature assignments aligned to this PLO	38	100%	Y
---	--	----	------	---

The CON plans to review this Signature Assignment achievement data at its August 2017 360° Faculty Retreat as part of the 360° evaluation process to determine appropriate action plans as all achievement levels have been met. Results of that meeting will be available at the site visit.

**Student Program Exit Survey for MSN-FNP:**

In Spring II, 2015 MSN-FNP student results demonstrated satisfaction related to CCNE Standards (N=4). Each survey question is tied to a CCNE standard. The following table displays the data. Another survey will be administered in 2017 post program completion. The expected level of achievement is 80% of students would indicate high or very high levels of satisfaction. The data indicates that 100% of students indicated high or very high levels of satisfaction on all items in Standards 1-8 and 13 of 15 items in Standard 9. Regarding these 2 items, the CON reviewed the data and the clinical sites where these 4 students were placed and determined that because of the small N, the CON would look for trend data in the next iteration of the survey around these 2 items before making any curricular changes.

Question/Standard	% of High/Very High	Mean (SD)
<b>Standard 1: Background for Practice from Science and Humanities</b>		
Integrate Nursing and related sciences into the delivery of advanced nursing care to diverse populations?	100%	4.50 (.58)
Apply ethical analysis and clinical reasoning to evaluate advanced nursing care delivery?	100%	4.75 (.5)
Synthesize evidence for practice to determine appropriate interventions across diverse populations?	100%	4.50 (.58)
Use quality process and improvement science to improve patient safety?	100%	4.50 (.58)
<b>Standard 2: Organizational and System Leadership</b>		
Lead an inter-professional team in implementing patient safety initiatives	100%	4.50 (.58)
Understand how healthcare organization and financing impact patient care	100%	4.75 (.5)
Implement system change strategy that improve the care environment	100%	4.75 (.5)
Participate in the design and implementation of new models of care delivery	100%	4.75 (.5)
<b>Standard 3: Quality Improvement and Safety</b>		
Promote a professional environment involving activities like peer review, patient advocacy and reporting of errors	100%	4.75 (.5)
Direct quality improvement efforts to promote culturally responsible high-quality, patient-centered care.	100%	4.75 (.5)
Compare and contrast quality improvement models	100%	4.75 (.5)
Lead quality improvement initiative that integrate socio-cultural factors	100%	4.75 (.5)
<b>Standard 4: Translating and Integrating Scholarship into Practice</b>		
Integrate information from multiple sources into patient care, e.g. Theory evidence, patient preferences, clinical judgement	100%	4.75 (.5)
Apply practice guidelines to improve practice in the care environment	100%	4.50 (.58)
Evaluate the credibility of information to determine the best evidence for practice	100%	4.75 (.5)
Defend the evidence used for practice decisions i.e., the credibility of sources of information and the relevance to the practice problem confronted	100%	4.75 (.5)
<b>Standard 5: Informatics and Healthcare Technology</b>		
Analyze technology to support safe practice environments and to optimize patient care	100%	4.75 (.5)

Evaluate outcomes data to develop strategies to reduce risk and improve health outcomes	100%	4.75 (.5)
Promote policies that incorporate ethical principles and standards in the use of information technology	100%	4.75 (.5)
Teach patients using information and education technology, resources, and principles of learning.	100%	4.75 (.5)
Standard 6: Health Policy and Advocacy		
Analyze how health care policies influence the structure and financing of healthcare, practice, and health outcomes	100%	4.75 (.5)
Examine the effects of legal and regulatory processes on nursing practice, healthcare delivery, and outcomes	100%	4.75 (.5)
Interpret research from a nurse's perspectives for policy holders and stake holders	100%	4.75 (.5)
Advocate for policies that improve public health and the nursing profession	100%	4.75 (.5)
Standard 7: Inter-professional Collaboration for Improving Patient and Population Health Outcomes		
Advocate for the role of the professional nurse as member and leader of inter-professional healthcare teams	100%	4.75 (.5)
Understand other health professions scopes of practice to maximize contributions within the healthcare team	100%	4.75 (.5)
Collaborate effectively across an inter professional team to deliver healthcare	100%	4.75 (.5)
Mentor nurses and other members of the healthcare team	100%	4.75 (.5)
Standard 8: Clinical Prevention and Population Health for Improving Health		
Synthesize data to deliver evidenced based, culturally relevant clinical prevention, interventions and strategies	100%	4.75 (.5)
Evaluate the effectiveness of clinical prevention interventions that effect populations, health outcomes, using health information technology and data sources	100%	4.50 (.58)
Provide equitable and efficient prevention services	100%	4.75 (.5)
Integrate clinical prevention and population health concepts to develop culturally appropriate health education, communication strategies, and interventions	100%	4.75 (.5)
Standard 9: Master's Level Practice		
To What degree did you NP education enhance your ability to:		
Conduct a patient assessment for patient care	100%	4.50 (.45)
Apply the best available evidence as the foundation for nursing practice	100%	4.75 (.5)
Advocate for patients and members of the healthcare team	100%	4.75 (.5)
Use information and communication technologies to support patient care	100%	4.75 (.5)
Use leadership skills to mentor other members of the healthcare team	75%	4.50 (1)
Use data to understand the health status of patient populations to determine appropriate interventions	75%	4.50 (1)
Use knowledge of illness and disease management to provide evidenced based care	100%	4.75 (.5)
Incorporate core scientific and ethical principles in addressing ethical issues	100%	4.75 (.5)
Apply knowledge of the effects of the global environmental and individual and population characteristics to provide patient care	100%	4.75 (.5)
Use knowledge and skills of business practices in providing patient care	100%	4.75 (.5)
Lead a healthcare team to deliver care	100%	4.75 (.5)
Apply learning and teaching principles in the delivery of health education programs	100%	4.75 (.5)
Maintain optimal relationships with patients and other professionals	100%	4.75 (.5)

Promote lifelong learning for yourself and your peers	100%	4.75 (.5)
Integrate an evolving personal philosophy of nursing and healthcare into one's nursing practice	100%	4.75 (.5)

#### Student End-of Course Surveys:

Student end-of-course surveys are completed at the end of every course. The table below demonstrates three years of aggregate data. The expected level of achievement is a score of 3.5 or above. Except in one item, in 2015 only, the CON exceeded its target benchmark.

Student End-of-Course Aggregate Data 2014-2016	2014 (Q4)	2015	2016
	N = 102	N = 267	N = 395
	Score	Score	Score
<b>Course Structure</b>			
Used multiple instructional methods, i.e. lecture, case study, group work, simulation.	3.57	3.95	3.91
Was clear with class instructions/directions/expectations.	3.57	3.29	3.77
Communicated course content that was meaningful to me.	3.57	3.71	4.00
I achieved the stated learning objectives/outcomes for this course.	3.29	3.71	3.77
The course met stated learning objectives and goals.	3.57	3.6	3.77
<b>Instructor Presence &amp; Learning Community</b>			
Instructor provided help as needed.	3.86	3.67	3.77
Instructor provided feedback in a timely manner.	3.86	3.57	3.95
My instructor was prepared for class.	4.00	3.76	3.95
My instructor created and maintained a positive learning environment.	3.86	3.86	4.00
My interactions with the instructor were positive.	4.00	3.90	4.00
My interactions with the instructor were professional.	4.00	3.95	4.00
My instructor was knowledgeable of/with course content.	4.00	3.81	3.95
<b>Assessment</b>			
My learning was assessed fairly.	4.00	3.76	4.00
My learning was assessed accurately.	3.86	3.71	3.95
<b>Content Organization and Usability</b>			
This course gave opportunities to demonstrate understanding throughout the class (i.e. offered relevant assessments of learning).	3.43	3.70	4.00
This course provided opportunities for quality interactions (e.g., discussion board).	3.71	3.80	4.00
This course offered collaborative work that helped meet course objectives (e.g., group projects, wikis, blogs).	3.71	3.70	3.81
This course offered outside independent work that facilitated learning and met course objectives.	3.86	3.71	4.00
This course provided content/materials that facilitated learning and met course objectives.	3.86	3.71	3.95
This course provided readings that facilitated learning and met course objectives.	3.57	3.67	3.95
This course provided assignments that facilitated learning and met course objectives.	3.86	3.75	3.95
This course provided assessments/test/exams that aligned with course objectives.	3.71	3.70	4.00
<b>Technology</b>			
I was able to get helpful tech support when I needed it.	3.40	3.71	3.91
I was able to manage the technology demands of the course.	3.50	3.43	3.77
I was computer literate before taking this course.	3.71	3.85	3.96
My level of comfort using technology has increased during the	3.40	3.86	4.00

course.			
I received adequate training to be successful in this course in: Project Concert in general	3.29	3.89	3.95
I received adequate training to be successful in this course in: Project Concert collaboration tools	3.40	3.81	3.95
I received adequate training to be successful in this course in: How to submit/turn in my completed work	3.70	3.81	4.00

#### Faculty End-of-Course Surveys:

Faculty end-of-course surveys are completed after each course. The expected level of achievement is that 85% of faculty will respond “Yes” on each question. In the table below, several items in both 2014 and 2015 indicate that the target benchmark was not met. Those items were addressed and in 2016, 100% of faculty responded “Yes” to all items. The table below demonstrates three years of aggregate data.

Faculty End-of-Course Aggregate Data 2014-2016	2014 (Q4)	2015	2016
	N = 22	N = 40	N = 41
	Yes %	Yes %	Yes %
<b>Course Structure</b>			
The course adheres to the Course Syllabus.	100	100	100
The course shell utilizes all or most of the online course template?	100	75	100
Course assignments and activities are distributed equally or as appropriate throughout the semester.	100	100	100
Appropriate technologies and methods are used to support course activities/assignments.	100	100	100
Assignment submission mechanisms, assignment/activity instructions, points, and Grade Center setup align with the course syllabus and are organized from the student’s perspective.	100	75	100
<b>Syllabus</b>			
Instructor’s email, phone number, office hours, and professional introduction are presented.	100	100	100
Textbook information (with ISBN) and/or other required materials are identified. Program Core Books are utilized. E-book access is utilized and identified.	100	100	100
Weekly course outline includes readings, topics/modules, learning activities, assessments, and deadlines.	100	100	100
Expected turn-around time in responding to students’ emails is stated (e.g., within 24 hours or between 24 - 48 hours).	100	100	100
Expected time for students to receive feedback on assignments, discussion postings, papers, exams, etc. is stated (e.g., in a week or less).	100	100	100
Methods for communicating with students are stated (e.g., updates and changes via announcements or e-mail, progress and feedback via Gradebook, etc.)	100	100	100
Expectations of students’ responsibilities are clearly stated (e.g., self-discipline, checking emails, responding to discussion forums, etc.)	100	100	100
Descriptions of deadlines for assignments, projects, discussion board responses, chat sessions, activities, quizzes, exams, etc. are provided.	100	100	100
The number of points for each assignment and a final course grading scale (in points or percentages) is disclosed.	100	100	100
Course and university policies are stated (e.g., late submissions, make-ups, and re-writes, incompletes, accessibility, accommodation, academic integrity, etc.).	100	100	100
<b>Content Organization and Usability</b>			

The course mirrors the face-to-face content with appropriate learning materials, activities, and assessments.	100	100	100
An overview of weekly learning objectives, tasks, learning materials and activities is presented.	100	100	100
Each folder/item contains a topic/title and description of its content.	100	100	100
Text color, font size, and type are consistent throughout the course with proper headings and formats.	100	100	100
Graphics, images, and other media components are relevant to the course content, current and accessible.	100	100	100
Lengthy course materials are broken into manageable segments.	100	100	100
The course materials are organized by topic and use appropriate delivery formats (e.g., lecture notes with visual enhancements, PowerPoint presentations with narrations, audios, videos, simulations, and other media).	100	100	100
Transcriptions are provided on PowerPoint narrated lectures and on course intro audios/videos.	100	75	100
External resources relevant to the course content are available.	100	100	100
Appropriate copyright permission is obtained for articles, images, audio and video clips, and other media used in the course.	100	100	100
All external links work properly and are set to open in a new browser window.	50	100	100
<b>Instructor Presence &amp; Learning Community</b>			
An announcement welcomes and directs students to the course introduction and syllabus.	50	100	100
The course introduction establishes the instructor's presence, overviews the course, provides clear direction for getting started, and initiates a positive learning environment.	100	100	100
A guideline is provided about how the instructor and students will engage and interact with one another (e.g., discussion board, chat, blog, journal, wiki, email, phone, etc.).	75	100	100
Group/collaborative assignments/activities are designed to help students achieve the learning outcomes (e.g., research, case studies, presentations, etc.).	75	100	100
Peer activities are included to help students engage with one another and to achieve the learning outcomes (e.g., reviews, critiques, evaluations, small-group discussion boards, etc.).	75	100	100
Guest speakers are included in the course.	75	100	100
<b>Assessment</b>			
Assessment methods and learning activities align with the course objectives and learning outcomes.	75	100	100
A variety of assessment methods and types is included.	75	100	100
The number, length, and depth of assessments are adequate to measure student learning.	75	100	100
Evaluation criteria for measuring the quality and quantity of assignments, discussion postings, projects, exams, etc. are clearly communicated with students in the syllabus or through grading rubrics and/or guidelines.	100	100	100
Threaded discussions are graded components of the course with a grading rubric or grading criteria provided.	100	100	100
Instructions for assessments are explicitly stated and clearly explained (e.g., proctored or non-proctored exams, topics/skills covered, length and formatting requirements, time limits, number of	75	100	100

attempts allowed, type of exam questions, number of questions, points per question, special rules, external materials allowed during exams, etc.).			
Opportunities for self-assessment (e.g., practice quizzes, study questions, etc.) are provided when using standardized/objective assessments.	75	100	100
<b>Caring Science</b>			
Contract grading strategy for evaluation of student performance is incorporated into student evaluation process and defined in syllabus.	50	100	100
Core principles/practices of Theory of Human Caring Science are identified in course learning outcomes.	50	100	100
Multiple ways of knowing defined in assignments and student assessment.	50	100	100
Reflective exercise is integrated into student self-evaluation process	50	100	100

**IV-F. Faculty outcomes, individually and in the aggregate, demonstrate program effectiveness.**

*Elaboration: The program demonstrates achievement of expected faculty outcomes. Expected faculty outcomes:*

- are identified for the faculty as a group;
- incorporate expected levels of achievement;
- reflect expectations of faculty in their roles and evaluation of faculty performance;
- are consistent with and contribute to achievement of the program’s mission and goals; and
- are congruent with institution and program expectations.

*Actual faculty outcomes are presented in the aggregate for the faculty as a group, analyzed, and compared to expected outcomes.*

**Program Response:**

**Faculty Performance via Portfolio**

In 2015, all university faculty were required to develop a personal professional portfolio that contained the following domains: Teaching/Advising, University Governance Responsibilities, Scholarly and Creative Contributions, Professional Service, and Community Service. 100% of CON faculty completed this initial portfolio (Appendix IV-F.1: Sample CON Redacted Portfolio). The CON Dean added an additional requirement that her faculty indicate a proposed action plan and professional goals for the following year (2016), which each faculty completed and submitted. The portfolio was submitted to the Dean for review and annual portfolios have become the basis for an annual evaluation and subsequent workload assignments. For example, if the faculty member planned to submit an abstract for presentation at a professional conference, this could be considered part of their workload. The Dean submitted completed portfolios to the President.

In early 2017, as a point of continuous improvement, the USU Faculty Senate developed and approved a weighted evaluation rubric for these portfolios (Appendix IV-F.2: Faculty Performance Evaluation Rubric Template). The achievement levels are Superior, Satisfactory, Requires Improvement, and Deficient. The chart below indicates the scoring distribution. All core faculty are expected to achieve a score of 51 points or higher (Satisfactory), or a weighted ranking of 21 (Satisfactory). Any faculty falling below the benchmark are required to submit a remediation plan for improvement to their respective chair or Dean.

	Points (Range)			Weighted Ranking (Range)		
Superior	68	-	88	28	-	32
Satisfactory	51	-	67	21	-	27
Requires Improvement	34	-	50	14	-	20
Deficient	17	-	33	0	-	13

This USU-wide rubric was used by the CON Dean to evaluate the second portfolio submissions, plus action plans/professional goals, from 2016. The following table displays the total points and weighted rankings possible and actual achievements based on the percentages assigned to each domain in the Faculty Handbook, as explained for the CON in I-C.

Domain (N=4)	Total Possible Points (4 x 88 = 352)	Actual CON Faculty Average Points	Total Possible Weighted Ranking (4 x 32= 128)	Average CON Faculty Weighted Ranking
Teaching and Advising (60%)	211.2	36	76.8	19.2
Governance (20%)	70.4	27.25	25.6	6.3
Scholarly and Creative Contributions Professional Service (20% for all 3) Community Service	70.4	24	25.6	6.22
Total Average Point Score	352	87.25		
Total Average Weighted Score			128	31.72

Based on the total averages, 100% of CON core faculty (N=4) were rated at the Superior level for both Points (87.25 out of the high of 88) and Weighted Ranking (31.72 out of the high of 32) on the benchmark scale above.

#### Faculty Performance by Student End-of-Course Evaluation:

In the CON, students have the opportunity to evaluate faculty in an end-of-course evaluation which contains 7 specific items related to faculty teaching and engagement practice. When the CON began these evaluations in 2014, the response rate was 18%. The average response rate in 2016 was 93%. The CON has actively encouraged students to respond to these evaluations. The College values the opinions of its students as it aims for student success. The evaluation is administered through Project Concert<sup>®</sup> which provides data at the individual course level by faculty and in the aggregate.

Following is the aggregated faculty data from student end-of-course surveys over the past 3 years. The target benchmark is 3.5 or above. CON faculty met the target in all years for all items.

Item	2014 (Q4)	2015	2016
	N = 102	N = 267	N = 395
Instructor provided help as needed.	3.86	3.67	3.77
Instructor provided feedback in a timely manner.	3.86	3.57	3.95
My instructor was prepared for class.	4.00	3.76	3.95
My instructor created and maintained a positive learning environment.	3.86	3.85	4.00
My interactions with the instructor were positive.	4.00	3.90	4.00
My interactions with the instructor were professional.	4.00	3.95	4.00
My instructor was knowledgeable of/with course content.	4.00	3.81	3.95

At a course level, the CON Dean reviews the results of these student end-of-course evaluations to ensure individual faculty are meeting their professional obligations. The Dean expects to see a minimum of 4 for each of the survey criteria. Any outliers are discussed and addressed with the individual faculty member. Following is an example of the student end of course evaluation for a course where students have evaluated a particular faculty member.

6) Instructor provided help as needed.	11	2	1	0	0	14	3.7143	0.6112
7) Instructor provided feedback in a timely manner.	10	3	0	1	0	14	3.5714	0.8516
8) My instructor was prepared for class.	10	3	0	1	0	14	3.5714	0.8516
9) My instructor created and maintained a positive learning environment.	11	3	0	0	0	14	3.7857	0.4258
10) My interactions with the instructor were positive.	12	2	0	0	0	14	3.8571	0.3631
11) My interactions with the instructor were professional.	14	0	0	0	0	14	4.0000	0.0000
12) My instructor was knowledgeable of/with course content.	12	2	0	0	0	14	3.8571	0.3631

On the evaluation, students are additionally able to provide qualitative comments on their faculty. Following is a snapshot of typical comments.

33) Please share any other comments you have about this course and/or instructor.

see below

making the capstone was is very painstaking I am glad I have as my chair and instructor he was very patient.

no comments

This course was extremely time-consuming. I never thought I could write a paper like this before, and I am very grateful to the instructor for collaborating with me to make it happen. I learned a lot through this whole process.

Dr. Peraza-Smith is very knowledgeable in all assignments presented and discussed. He never gets angry with students, and always presents with an optimistic attitude in class.

At the annual 360° Faculty Retreat, discussion ensues around an aggregate report of the evaluations for particular courses (Appendix IV-A.2: Sample 2016 FNP Aggregate Student Course Evaluation Report)). Because the Dean has addressed outliers at the course session level throughout the year, the faculty spend most of their time reviewing the qualitative data for comments about specific faculty members to identify general opportunities for improvement.

#### IV-G. The program defines and reviews formal complaints according to established policies.

*Elaboration: The program defines what constitutes a formal complaint and maintains a record of formal complaints received. The program's definition of formal complaints includes, at a minimum, student complaints. The program's definition of formal complaints and the procedures for filing a complaint are communicated to relevant constituencies.*

#### Program Response:

The institutional policy for submitting formal complaints can be found in the University Catalog on p. 27 at <https://www.usuniversity.edu/wp-content/uploads/2017/05/USU-Catalog-2017-Master-051817.pdf>. The CON and its students adhere to the institutional policy. The university catalog clearly defines what constitutes a formal complaint. The institution maintains a record of all formal complaints as required by its regional accreditor; the CON maintains a record of those related specifically to the CON. For the CON, there have been no complaints filed in the previous 3 years.

The timeline for processing a complaint is part of the instructions found in the Academic Catalog. The policy is applicable to all USU stakeholders and constituents. The university encourages students to use the process identified in the catalog for filing a formal complaint related to course work within the College of enrollment, in this case the CON. When the Dean receives a formal complaint, it is acted on expeditiously in the interest of student success. The Dean will have either a face-to-face or email discussion with the involved parties and seek resolution amicably. The Dean may consult with the CON grievance committee. If a formal complaint is related to an issue outside of the classroom, the Director of Student Services attends to the issue by discussion or in writing when the student submits the complaint in writing. If resolution does not occur at either the applicable Dean or Director level and all options are expended, then the complaint must be brought to the Office of the Provost in writing. The Provost then makes a determination and takes an appropriate course of action.

#### IV-H. Data analysis is used to foster ongoing program improvement.

*Elaboration: The program uses outcome data for improvement. Data regarding completion, licensure, certification, and employment rates; other program outcomes; and formal complaints are used as indicated to foster program improvement.*

- *Data regarding actual outcomes are compared to expected outcomes.*
- *Discrepancies between actual and expected outcomes inform areas for improvement.*
- *Changes to the program to foster improvement and achievement of program outcomes are deliberate, ongoing, and analyzed for effectiveness.*
- *Faculty are engaged in the program improvement process.*

#### **Program Response:**

The CON is committed to using data for ongoing program improvement. The CON's SPE drives data analysis opportunities and timelines. On an annual basis, the CON conducts a 360° Faculty Retreat where data driven decision making is implemented through the 360° evaluation process. During the Retreat, faculty and college administration review and analyze the data and then make decisions to inform programmatic improvement. Examples of the results of the 360° evaluation process can be found in the minutes of the August 2016 360° Faculty Retreat (Appendix I-B.1: 8/2016 Faculty Retreat Minutes).

The 360° evaluation process consists of the following:

- Initial introduction of meeting purpose and meeting goals
- Celebration of successes
- Explain data types to be reviewed
- Conduct a review of each data type looking for areas for improvement, concerns, and action items that need to be followed up on
- Monitor the curricular or pedagogical improvements implemented previously, adding comments where appropriate to success or continued monitoring needed
- Discuss budget needs to address any improvements determined during the data analysis
- Review all handbooks, forms, catalogs, and websites for continued congruence between the CON and the university
- Evaluation of SPE itself, recording changes or updates as needed
- Assessment of 360° evaluation process

Types of data included in the 360° evaluation process at an annual 360° Faculty Retreat:

- Assessment Matrix data, aggregated annually by PLO. As a point of continuous improvement, with the advent of the new PLO-aligned achievement target (*80% of students will receive an 80 or better on signature assignments*) these aggregate signature assignment data will be added as a data type to the 360° evaluation process effective with the next annual 360° Faculty Retreat scheduled for August 2017. See 2016 FNP data in IV-E.

- Student end of course evaluations, aggregated by comment and data results by course every time it was taught in a given year. See CON data in IV-E.
- Faculty end of course evaluations, aggregated by comment and data results by course every time it was taught in a given year. See CON data in IV-E.
- Immersion evaluation, aggregated by comment and data results by number of immersions held in a given year (Appendix IV-A.15: 2016 Aggregate Immersion Evaluation Report).
- Program Exit evaluations, aggregated annually (Appendix IV-A.16: 2016 RN to BSN/FNP Aggregate Program Exit Report).
- Faculty Evaluation of Clinical Preceptor; Faculty Evaluation of Clinical Site; Student Evaluation of Preceptor Relationship; and Preceptor Evaluation of Student Relationship, using a sample of each (Appendix IV-A.5: Sample Redacted Faculty Evaluation of Clinical Preceptor Term Report; Appendix IV-A.6: Sample Redacted Faculty Evaluation of Clinical Site Term Report; Appendix IV-A.7: Sample Redacted Student Evaluation of Preceptor and Clinical Site Term Report; Appendix IV-A.8: Sample Redacted Preceptor Feedback of Student Clinical Competencies Term Report). It should be noted that these are initially reviewed and acted upon per term for clinical courses to address needed changes or improvements immediately.
- University student satisfaction survey (Appendix IV-H.1: 2016 USU Collection 1 Student Satisfaction Survey Results). This aggregate data is used to consider how all students view the university. In the 2016 survey, 36% of respondents were CON students. Therefore, the CON was interested in understanding generally how CON students might be contributing to overall university satisfaction. For example, the overall rating in satisfaction about library services was an increase of 8% over the previous administration of the survey; CON's satisfaction in this area increased by 5%.
- University Retention and Persistence Reports includes information on enrollment, average registered credits, session-to-session persistence rates, basic statistics on class size, and grade distribution (Appendix IV-H.2: USU 2015 Retention and Persistence Report). For the CON, this report is used to watch trends. Following is an example of CON data for session-to-session persistence.

**Session to Session Persistence Rate by Program and Student Type (New and Continuing)**

Note: Students that have completed the program at the end of the session are excluded from the calculation.

	New		Continuing		Total	
	Count	%	Count	%	Count	%
<b>CON</b>						
<b>BSN - RN to BSN</b>						
Yes	-	-	10	100%	10	100%
No	-	-	-	-	-	-
<b>ELM/ABS</b>						
Yes	-	-	18	100%	18	100%

	New		Continuing		Total	
	Count	%	Count	%	Count	%
	1	100%	15	68%	16	70%
		0%	7	32%	7	30%
	-	-	35	100%	35	100%

For internal distribution only. | 4



No	-	-	-	-	-	-
<b>MSN</b>						
Yes	-	-	45	90%	45	90%
No	-	-	5	10%	5	10%

	10	91%	63	94%	73	94%
	1	9%	4	6%	5	6%

- University Program Learning Outcomes Assessment data. Because it is committed to academic quality and student success, the university additionally conducts an annual systematic learning outcomes

assessment process: <https://www.usuniversity.edu/wp-content/uploads/2017/06/Learning-Outcomes-Assessment-Principles-and-Process.pdf>). Within the process, all program learning outcomes are reviewed within a five-year cycle, according to the alignment between institutional learning outcomes (ILO) and PLOs outlined in Standard I-A. The annual results of the assessment of learning outcomes are used to inform follow-up planning and budgeting processes at the program and institutional levels as part of the institution's overall quality assurance system. The CON Associate Dean for Academic Affairs acts as the assessment lead representing the CON for institutional assessment practice. Following is a snapshot of recent data from the 2015-2016 cycle where the CON was evaluating MSN PLO 6 in relation to the Institutional Learning Outcome (ILO 1) Written Communication, using student work samples from the MSN 600 Capstone Project and the ILO Written Communication Rubric. The charts immediately following indicate the results of that assessment and the discussion of results for programmatic improvement. The entire report can be found in Appendix IV-A.16: 2015-16 Annual Report on Program Learning Outcomes Assessment.

Program Learning Outcome(s) List the PLOs assessed during the assessment year.	Evidence and Type Describe evidence you analyze (identify course & assignment type if direct), collection period, sample size, and type (direct/indirect) for each line of evidence (minimum of 2 lines of evidence; at least 1 direct)	Method List the assessment tool, assessors, and process used to analyze each line of evidence	Expected Level of Achievement State percentage of students you expect will achieve this PLO (& at what levels) by the end of your program.																																																												
PLO 6 - Apply the process of scientific inquiry to validate and contribute knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment. (Written Communication)	<b>Written Communication Evidence #1:</b> Evidence-Based Capstone Project (MSN600: Evidence Based Practice Capstone) Collection Terms: Summer I 2015 (n=5 Students)   Summer II 2015 (n=3 Students)   Fall I 2015 (n=9 Students)   Spring I 2016 (n=11 Students) Sample Size: 10 Correlation: 0.9 Type: Direct	<u>Tool:</u> Written Communication ILO Analytic Rubric: 0=Not Attempted 1=Attempted but in a simplistic or incomplete way 2=Achieved 3=Achieved in a comprehensive way <u>Process:</u> independent scorers <u>Assessors:</u> CON faculty	80% of student scores at "3" AND 20% at "2" or higher on the WC Rubric																																																												
Program Learning Outcome(s)	Results of Assessment List the results of each line of evidence for each PLO.																																																														
PLO 6 - Apply the process of scientific inquiry to validate and contribute knowledge relevant to improving healthcare outcomes within a dynamic healthcare environment. (Written Communication)	<b>Written Communication Evidence #1 Written Communication Assessment Data (n=10) for A-Level Course</b> Rubric Criteria and Scores: <table border="1" data-bbox="483 1524 1419 1892"> <thead> <tr> <th>Criterion</th> <th colspan="2">0</th> <th colspan="2">1</th> <th colspan="2">2</th> <th colspan="2">3</th> <th>Met? (20% at "2" AND 80% at "3")</th> </tr> </thead> <tbody> <tr> <td>Central Message</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>20</td> <td>100%</td> <td>Yes</td> </tr> <tr> <td>Organization</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>4</td> <td>20%</td> <td>16</td> <td>80%</td> <td>Yes</td> </tr> <tr> <td>Supporting Content</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>4</td> <td>20%</td> <td>16</td> <td>80%</td> <td>Yes</td> </tr> <tr> <td>Delivery</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>4</td> <td>20%</td> <td>16</td> <td>80%</td> <td>Yes</td> </tr> <tr> <td>Context &amp;</td> <td>0</td> <td>0%</td> <td>0</td> <td>0%</td> <td>6</td> <td>30%</td> <td>14</td> <td>70%</td> <td>No</td> </tr> </tbody> </table>			Criterion	0		1		2		3		Met? (20% at "2" AND 80% at "3")	Central Message	0	0%	0	0%	0	0%	20	100%	Yes	Organization	0	0%	0	0%	4	20%	16	80%	Yes	Supporting Content	0	0%	0	0%	4	20%	16	80%	Yes	Delivery	0	0%	0	0%	4	20%	16	80%	Yes	Context &	0	0%	0	0%	6	30%	14	70%	No
Criterion	0		1		2		3		Met? (20% at "2" AND 80% at "3")																																																						
Central Message	0	0%	0	0%	0	0%	20	100%	Yes																																																						
Organization	0	0%	0	0%	4	20%	16	80%	Yes																																																						
Supporting Content	0	0%	0	0%	4	20%	16	80%	Yes																																																						
Delivery	0	0%	0	0%	4	20%	16	80%	Yes																																																						
Context &	0	0%	0	0%	6	30%	14	70%	No																																																						

	Genre
	<p><b>Summary of Results:</b>            Summary: For the <u>Central Idea</u> criterion, student scores met the expected standard, with 80% at “3.”            For the <u>Organization</u> criterion, student scores met the expected standard, with 100% at “3” and 20% at “2.”            For the <u>Supporting Content</u> criterion, student scores met the expected standard, with 100% at “3” and 20% at “2.”            For the <u>Delivery: Written</u> criterion, student scores met the expected standard, with 100% at “3” and 20% at “2.”            For the <u>Context and Genre</u> criterion, student scores did not meet the expected standard, with 70% at “3” and 30% at “2.”</p>
<p><b>Achieving Standards:</b>  <i>Based on the results of all lines of evidence, did your program achieve its standards for success? (Yes/No)</i></p>	
<p>Yes, for 4 criteria: Central Message, Organization, Supporting Content, and Delivery            No, for 1 criterion: Context and Genre</p>	
<p><b>Discussion of Results for Program Improvement:</b>  <i>Based on discussions with your faculty about your compiled results, list what you’ve discovered about student learning (what did your findings show you?) and the significance of these findings for your program.</i></p>	
<p>MSN graduates are expected to effectively disseminate valid and meaningful contributes to the nursing knowledge and evidence. Written dissemination may include publications, paper presentations, manuscripts, assignments, blogs, etc. Students met four of the five expected criterion benchmark. Overall the percentages for all five criterions were over 100% at benchmarked level 2 and higher. ‘Central Message’, and ‘Delivery’ were met with 100% discrepancy free; but ‘Context and Genre’ was not. ‘Organization’ and ‘Supporting Content’ were met with 80% discrepancy free and 20% with one discrepancy. However, the inter-rater reliabilities were low with ‘Organization’ .51 and ‘Supporting Content’ .38. Secondary data from program evaluation data supports these findings. On the measure of ‘Translating and Integrating Scholarship in to Practice’ 100% of respondents rated this high or higher. In addition, on the measure of “Master’s Level Practice’ and processing the ability to use and communication technologies to support patient care 100 % respondents rated this high or higher.</p>	
<p><b>Participants in Discussing/Reviewing Results:</b>  <i>List all who participated in discussing learning results and implications (indicate core/adjunct for all faculty).</i></p>	
<p>Faculty were not satisfied with the specific results from ‘Organization’ and ‘Supporting Content’ criterion. Faculty discussed and acted to resolve at Spring 2016 Retreat. Dean and all core CON faculty present.</p>	

**Standard IV Summary**

**Areas of Accomplishment**

- CON students met the expected institutional learning outcomes.
- 360° evaluation process and the Faculty Retreat structure provide opportunity for faculty review and continuous improvement.
- Based on evaluation of data, changes to the program can be made quickly.
- End-of-program exit survey for FNP students indicates they are highly satisfied with their program.
- Efficient process for review of and action on grievances.

### **Areas for Continued Focus**

- Continued attention to FNP certification rates.
  - Action Plan: Continue implementation of the plan to raise certification rates and continue to monitor and evaluate its success.
- Continued attention to use of data to foster ongoing programmatic improvement.
  - Action Plan: Development of a plan to improve alumni and employer responses regarding program effectiveness.
  - Action Plan: Continue the use of the 360° evaluation process to make changes quickly when needed.